



LETTER OF APPOINTMENT

MEMORANDUM FOR HAROLD WHITAKER, FEDSIM PM

Subject: Appointment as Contracting Officer's Representative

You are hereby appointed as the Contracting Officer's Representative (COR). This appointment is from the award date through the life of the Contract, to include close out, unless rescinded or transferred. As the COR, your primary duty is to monitor the Contractor's performance to ensure that all of the technical requirements under the contract are met by the delivery date or within the period of performance, and at the price or within the ceiling stipulated in the contract.

In the performance of the duties delegated to you in this letter, you are cautioned that you could be held personally liable for actions taken or directions given by you to the Contractor that are beyond the authorities given to you in this letter. The duties or authorities in this letter are not re-delegable; therefore, you must advise the Contracting Officer or the Contract Specialist immediately when you are unable to perform these duties.

Your duties and limitations, as applicable to the contract you will be monitoring, are as follows:

MONITORING AND EVALUATING PERFORMANCE

Ensure that the Contractor complies with all of the requirements of the statement of work, specifications, or performance work statement. When requested by the Contractor, provide technical assistance within the scope of the contract (e.g., interpreting specifications, statement of work, performance work statement, etc.). When a difference of opinion between you and the Contractor occurs, notify the Contracting Officer and/or the Contract Specialist immediately for resolution.

If the contract requires Key Personnel, the COR shall ensure that the personnel being used by the Contractor meet the requirements of the position. Review and approve travel and other direct cost (ODC) prior to the Contractor incurring those expenses. Any decrease in or lack of performance shall be brought to the attention of the Contracting Officer and/or Contract Specialist.

If applicable and in accordance with FAR 42.302, the COR shall monitor contractor compliance with specifications or other contractual requirements requiring the delivery or use of environmentally preferable products, energy-efficient products, products containing recovered materials, and bio-based products.

In accordance in Federal Acquisition Circular (FAC) 2005-34 and OMB Memorandum "Improving the Use of Contractor Performance Information" on July 29, 2009, CORs are responsible for entering past performance into the Past Performance Information Retrieval System (PPIRS) annually.

MONITORING COSTS

Review and evaluate the Contractor's progress in relation to the expenditures. When the costs expended by the Contractor are not commensurate with the Contractor's progress, request a meeting with the Contractor and client in an attempt to resolve. If a resolution cannot be found, bring this to the attention of the Contracting Officer and/or Contract Specialist for immediate action.

Review and approve invoices using the rates and other fees established in the contract. Review the Contractor's invoices/vouchers for reasonableness and applicability to the contract and recommend approval or rejection for payment.

CHANGES TO THE CONTRACT

You cannot authorize the Contractor to stop work, and you are not authorized to delete, change, waive, or negotiate any of the technical requirements or other terms and conditions of the contract. Should a change (monetary or otherwise) to the contract become necessary, it must be made by a contract modification issued by the Contracting Officer. When in doubt, contact the Contracting Officer and/or Contract Specialist.

Any contract change requested by the Contractor must be put in writing by the Contractor to the Contracting Officer for action. If, however, you become aware of an impending change, you should immediately advise the Contracting Officer or Contract Specialist. When the proposed change is received by the Contracting Officer, you will be required to provide the Contracting Officer with a written analysis and rationale for the change and to evaluate any costs associated with the change.

You must also recognize and report to the Contracting Officer any Government-required changes to the contract (e.g., items or work no longer required, changes in the specifications, etc.).

INSPECTION OF CONTRACT ITEMS

Perform, in accordance with the terms of the contract, inspection, acceptance, or rejection of the services or deliverables under the contract. The COR must prepare, in writing, a written acceptance or rejection, provide it to the Contractor, and store a copy on the FEDSIM common drive. Immediately notify the Contracting Officer of all rejections and the reason for the action.

Review progress reports from the Contractor and advise the Contracting Officer of any Contractor problems or action required to be taken by the Government.

STANDARDS OF CONDUCT AND CONFLICT OF INTEREST

To avoid improper business practices and personal conflicts of interest and to deal with their apparent or actual occurrences, the COR shall sign any applicable non-disclosure forms. The COR shall also immediately report any potential conflict of interest to their supervisor.

CONTRACT FILE CONTENT AND MAINTENANCE

Establish and maintain an organized contract administration file to record all Contractor and Government actions pertaining to the contract. The file must also include a copy of the COR Letter of Appointment and other documents describing the COR duties; a copy of the contract administration functions delegated to the contract administration office, which may not be delegated to the COR; and documentation of COR actions taken in accordance with the delegation of authority. The files should be organized and saved on the FEDSIM common drive.

CONTRACT CLOSEOUT

Within 30 days after the Contractor has met all terms and conditions of the contract, you must evaluate the Contractor's performance using the information contained in General Services Administration Regulation (GSAR) 542.1503-71 (sample format attached).

Please acknowledge receipt and acceptance of this appointment by signing below. Please direct any questions you may have on this delegation to the Contracting Officer or Contract Specialist.

I understand and accept my assignment as the Contracting Officer's Representative (COR)

X Harold Whitaker

Harold Whitaker

Signed by: HaroldGWhitaker

GSAR 542.15 – Contractor Performance Information

542.1503-71 – Information to collect.

Note: This checklist follows the standard format of GSAM 542.1542.15 and content requirements of GSAM 542.15. The checklist may be tailored for the specific contract type. Any “NO” responses noted below shall be accompanied with a statement explaining the observation(s). For each observation(s) provide a recommendation to correct the non-compliance. Observations identify areas of non-compliance and do require response (and action plans, if applicable). Positive observations may be general or specific and may be suitable for replication across the agency as good practices.

Contractor Performance Information

Timeliness of delivery or performance	Yes	No	NA
(1) Adherence to contract delivery schedules.			
(2) Resolution of delays.			
(3) Number of “show cause” letters and “cure notices” issued.			
(4) Number of delinquent deliveries.			
(5) Number of contract extensions resulting from contractor-caused delays.			
(6) Timely submission or performance or required tests.			
(7) Other.			
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Conformance of product or service to contract requirements	Yes	No	NA
(1) Quality of workmanship.			
(2) Reliability.			
(3) Adequacy of correction of defects.			
(4) Number of safety defects.			
(5) Number of product rejections.			
(6) Results of laboratory tests.			
(7) Number and extent of warranty problems.			
(8) Other.			
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

GSAR 542.15 – Contractor Performance Information

542.1503-71 – Information to collect.

Customer comments	Num	Qty	NA
(1) Number and quality of positive comments.			
(2) Number and nature of complaints.			
(3) Adequacy of resolving customer complaints.			
(4) Other.			
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Terminations for default	Yes	No	NA
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

On-the-job safety performance record, including the number of lost or restricted workdays due to occupational injuries in comparison to the national average	Yes	No	NA
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Adequacy of contractor's quality assurance system	Yes	No	NA
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Compliance with other key contract provisions	Yes	No	NA
(1) Subcontracting program			
(2) Labor standards			
(3) Safety standards.			
(4) Reporting requirements			
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

GSAR 542.15 – Contractor Performance Information

542.1503-71 – Information to collect.

Exhibiting customer-oriented behavior	Yes	No	NA
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Other performance elements identified	Yes	No	NA
<u>Observations (specify item #):</u>			
<u>Recommendations:</u>			

Attachment B – TOR Acronym List

Acronym	Meaning
A-File	Alien File
AAA	Architecture Alignment and Assessment
AaaS	Analytics as a Service
AAR	After Action Report
AAS	Assisted Acquisition Service
AASBS	Assisted Acquisition Services Business Systems
AB	Advisory Board
ABI	Architect Before Invest
AC	Actual Cost
ACE	Automated Commercial Environment
ACO	Administrative Contracting Officers
ACS	Automated Commercial System
AD/CVD	Anti-Dumping / Countervailing Duties
ADA	Acquisition Decision Authority
ADE	Acquisition Decision Event
ADM	Acquisition Decision Memo
AES	Advanced Encryption Standard
AFDO	Award Fee Determining Official
AFDP	Draft Award Fee Determination Plan
AFEB	Award Fee Evaluation Board
AGF	Agile Governance Framework
ALF	Acquisition Life Cycle
AMO	Air & Marine Operations
ANSI	American National Standards Institute
AoA	Analysis of Alternatives
AP	Acquisition Plan
API	Application Programming Interface
ASSIST	Assisted Services Shared Information System
AST	Automated Scheduling Tool
ATO	Authority / Authorization to Operate
ATS	Automated Targeting Systems
AUFRS	Assaults and Use of Force Reporting System
AWS	Amazon Web Services

Acronym	Meaning
AWT	Airport Wait Times
BDW	BEMSD Data Warehouse
BEAGLE	Border Enforcement Applications for Government Leading-Edge IT
BECN	Border Enforcement Communications Network
BEMSD	Border Enforcement Systems Directorate
BES	Border Enforcement Systems
BI	Background Investigation
BPA	Blanket Purchase Agreement
BPES	Border Patrol Enforcement Systems
BPETS	Border Patrol Enforcement Tracing System
BPI	Business Process Improvement
BPS	Border Patrol Systems
BWT	Border Wait Times
C-TPAT	Customs Trade Partnership Against Terrorism
C&A	Certification and Accreditation
CA	Chief Architect
CAC	Capabilities and Constraints
CAC	Common Access Card
CAF	Contract Access Fee
CAGE	Commercial and Government Entity
CAP	Contractor Acquired Property
CAS	Cost Accounting Standards
CBP	Customs & Border Protection
CCB	Change Control Board
CCB	Configuration Change Board
CCTS	Chief Counsel Tracking System
CFR	Code of Federal Regulations
CI	Commitment Items
CI/CD	Continuous Integration / Continuous Deployment
CIL	Configuration Items Library
CIO	Chief Information Officer
CISSM	Certified Information Systems Security Manager
CISSP	Certified Information Systems Security Professional
CLIN	Contract Line Item Number

Acronym	Meaning
CM	Configuration Management
CMAx	Common Mainframe Access
CMIS	Cost Management Information System
CMMI	Capability Maturity Model Integration
CMP	Configuration Management Plan
CMR	Configuration Management Repository
CNSSP	Committee on National Security Systems Policies
CO	Contracting Officer
CONUS	Continental United States
COOP	Continuity of Operations
COR	Contracting Officer's Representative
COSS	CBP Overtime Scheduling System
COTS	Commercial-off-the-shelf
COY	Current Operational Year
CPAF	Cost-Plus-Award-Fee
CPARS	Contractor Performance Assessment Rating System
CPFF	Cost-Plus-Fixed-Fee
CPI	Cost Performance Index
CPIC	Capital Planning and Investment Control
CR	Change Request
CRM	Customer Relationship Management
CROSS	Customs Rulings Online Search System
CRR	Cloud Readiness Review
CS	Contract Specialist
CSA	Configuration Status Accounting
CSMS	Cargo Systems Messaging Service
CSO	Chief Security Officer
CSP	Cloud Service Provider
CSPD	Cargo Systems Program Directorate
CTA	Contractor Teaming Arrangement
CTI	COSS Transformation Initiative
CTO	Chief Technology Officer
CTP	Consent to Purchase
CTS	Contractor Tracking System

Acronym	Meaning
D/S	Disclosure Statement
DCAA	Defense Contract Audit Agency
DCM	Data Center Migration
DCMA	Defense Contract Management Agency
DD / DoD	Department of Defense
DEA	Drug Enforcement Administration
DEL	Deliverable
DFARS	Defense Federal Acquisition Regulation Supplement
DHS	Department of Homeland Security
DOD	Definition of Done
DOJ	Department of Justice
DP	Destination Plan
DPQ	Desired Proposal Qualities
DPR	Destination Plan Review
DR	Disaster Recovery
DSSR	Department of State Standardized Regulations
DUNS	Data Universal Numbering System
DVD-ROM	Digital Video Disk – Read Only Memory
E-STAR	Enforcement Action Statistical Analysis and Reporting System
EA	Enterprise Architecture
EAB	Enterprise Architecture Branch
EAC	Estimated Cost at Completion
EARB	Enterprise Architecture Review Board
ECF	Electronic Court Filing
ECL	Enterprise Constraints List
ECP	Engineering Change Proposal(s)
EDG	Executive Decision Group
EDMED	Enterprise Data Management & Engineering Directorate
EDMO	Enterprise Data Management Office
EEO	Equal Employment Opportunity
eGIS	Enterprise Geospatial Information Services
EGOP	Enterprise Governance Oversight Plan
EIA	Electronic Industries Alliance
eISA	Electronic Interagency Security Agreement
EIT	Electronic and Information Technology

Acronym	Meaning
ELDM	Enterprise Logical Data Model
ENTSD	Enterprise Network & Technology Support Directorate
EPO	Electronic Payment Options
ERO	Enforcement and Removal Operations
ESD	Enforcement Systems Division
ESS	Enterprise Support Services
EST	Eastern Standard Time
ET	Eastern Time
ETC	Estimate to Completion
ETL	Extract Transfer Load
EV	Earned Value
EVM	Earned Value Management
FAA	Federal Aviation Administration
FACTS	Firearms, Armor, and Credentials Tracking System
FAQ	Frequently Asked Questions
FAR	Federal Acquisition Regulation
FAS	Federal Acquisition Service
FBI	Federal Bureau of Investigation
FBL	Functional Baseline
FCA	Functional Configuration Audit
FCCM	Facilities Capital Cost of Money
FEA	Federal Enterprise Architecture
FEDSIM	Federal Systems Integration and Management Center
FEMA	Federal Emergency Management Administration
FFP	Firm Fixed Price
FISMA	Federal Information Security Management Act
FITT	Facilities and Infrastructure Tracking Tool
FMD	Financial Management Division
FOC	Full Operational Capability
FOIA	Freedom of Information Act
FOUO	For Official Use Only
FP&FD	Fines, Penalties & Forfeitures Division
FRB	Financial Review Board
FSC	Federal Service Code
FSS	Federal Supply Schedule

Acronym	Meaning
FTE	Full-Time Equivalent
FTR	Federal Travel Regulation
FY	Fiscal Year
G&A	General & Administrative
GFE	Government-Furnished Equipment
GFI	Government-Furnished Information
GFP	Government-Furnished Property
GIS	Geospatial Information Systems
GOTS	Government-off-the Shelf
GPS	Global Positioning System
GSA	General Services Administration
GSAM	General Services Administration Acquisition Manual
GSAR	General Services Administration Acquisition Regulation
GWAC	Government Wide Acquisition Contract
HD	High Definition
HERD	U.S. Border Patrol Horse Patrol Equine Rider Database
HLS	Homeland Security
HQ	Headquarters
HRM	Human Resources Management
HSAR	Department of Homeland Security Acquisition Regulation
HSI	Homeland Security Investigations
IA	Interagency Agreement
IA	Information Assurance
IAC	Infrastructure as Code
IAW	In Accordance With
ICAD	Intelligent Computer Assisted Detection / Dispatch System
ICD	Interagency Contract Directory
ICE	Immigration & Customs Enforcement
ICM	Investigative Case Management
ICT	Information and Communications Technology
ID	Identification
IDIQ	Indefinite Delivery/Indefinite Quantity
IDV	Indefinite Delivery Vehicle(s)
IEPD	Information Exchanges Package Document
IFT	Integrated Fixed Towers

Acronym	Meaning
ILSS	Integrated Logistics Support System
IOC	Initial Operating Capability
IPR	Intellectual Property Rights
IPv6	Internet Protocol version 6
IRC	Information Resources Center
IRR	Integration Readiness Review
IRS	Internal Revenue Service
ISO	International Organization for Standardization
ISSO	Information Systems Security Officer
IT	Information Technology
ITAR	Information Technology Acquisition Review
ITIL	Information Technology Infrastructure Library
ITSM	IT Service Management
IV&V	Independent Verification and Validation
IWS	Incident Warning System
JHU-APL	Johns Hopkins University's Applied Physics Lab
JICMS	Joint Integrity Case Management Systems
JTR	Joint Travel Regulation
KM	Knowledge Management
KPQM	Key Personnel Qualification Matrix
LAN	Local Area Network
LCCE	Lifecycle Cost Estimate
LD	Limited Rights Data
LDM	Logical Data Model
LECA	Law Enforcement Communications Analyst(s)
LES	Law Enforcement Sensitive
LESC	Law Enforcement Safety and Compliance Directorate
LH	Labor Hour
LOE	Level of Effort
MA	Multiple Award
MCR	Mobile Collections and Receipts
MCS	Mission Critical Systems
MD	Management Directive
MES	Mission Essential Systems

Acronym	Meaning
MIIA-SPD	Management Inspection and Integrity Assurance, Security Program Division
MNS	Mission Needs Statement
MOU	Memorandum of Understanding
MP	Migration Plan
MROD	Mission Readiness Operations Directorate
MS	Microsoft
MSB	Mission Support Branch
MSR	Monthly Status Report
MSR	Monthly Status Report
MSS	Mission Support Services
NAICS	North American Industry Classification System
NCIC	National Crime Information Center
NDA	Corporate Non-Disclosure Agreement
NFC	National Finance Center
NFR	Non-functional Requirements
NIAP	National Information Assurance Partnership
NIEM	National Information Exchange Model
NIMS	Network Information Management System
NIST	National Institute of Standards and Technology
NLECC	National Law Enforcement Communications Center
NLT	No Later Than
NOC	Network Operations Center
NSA	National Security Agency
NSP	Not Separately Priced
NSS	National Security Systems
NTE	Not-to-Exceed
O&M	Operations and Maintenance
OA	Ongoing Authorization (pertaining to security ATOs)
OA	Operational Analysis
OASIS	One Acquisition Solution for Integrated Services
OASISS	Operations Against Smuggling Initiative on Safety and Security
OAST	Office of Accessible Systems and Technology
OBIM	Office of Biometrics Identity Management
OCC	Office of Chief Counsel

Acronym	Meaning
OCI	Organizational Conflict of Interest
OCMM	OIT Configuration Management Manager
OCMPO	OIT CM Process Owner
OCMT	OIT Change Management Team
OCONUS	Outside the Continental United States
ODC	Other Direct Cost
OF	Office of Finance
OFAM	Office of Facilities and Asset Management
OFO	Office of Field Operations
OH	Overhead
OIT	Office of Information & Technology
OMB	Office of Management & Budget
OPA	Office of Public Affairs
OPR	Office of Professional Responsibility
OPR	Operational Problem Report(s)
ORBBP	Office of Border Patrol Requirements Based Budget Program
ORMD	Operational Requirements Management Division
ORR	Office of Regulations and Rulings
OS	Operations Support
OT	Office of Trade
OT&T	Overtime and Travel
OTD	Office of Training & Development
PAL	Process Asset Library
PBK	Product Backlog
PBL	Product Baseline
PCA	Physical Configuration Audit
PCII	Protected Critical Infrastructure Information
PD	Program Directorate / Division
PDCMC	Program Directorate / Div CM Coordinator
PDF	Portable Document Format
PDO	Program Decision Option
PIA	Privacy Impact Assessment
PII	Personally Identifiable Information
PIM	Project Initiation Memo
PIV	Personal Identity Verification
PKI	Public Key Infrastructure
PLP	Program Lifecycle Process

Acronym	Meaning
PM	Program/Project Manager
PMBOK	Project Management Body of Knowledge
PMI	Project Management Institute
PMO	Program Management Office
PMP	Project Management Plan
PMR	Program Management Review
PNR	Problem Notification Report
POC	Point of Contact
POE	Port(s) of Entry
POP	Program Oversight Plan
PoP	Period of Performance
POS	Point of Sale
PP	Protection Profiles
PPIRS	Past Performance Information Retrieval System
PQT	Pre-Clearance Queue Times
PRR	Production Readiness Review
PS	Project Start
PSA	Portfolio Suitability Assessment
PSC	Product Service Code
PSPD	Passenger Systems Program Directorate
PV	Planned Value
PWS	Performance Work Statement
Q&A	Question & Answer
QASP	Quality Assurance Surveillance Plan
QCP	Quality Control Plan
QTY	Quantity
RA	Recertification Application
RCA	Root Cause Analysis
RD	Requirements Document
RFI	Request for Information
RIP	Request to Initiate Purchase
RM	Release Management
RMF	Risk Management Framework
ROM	Rough Order of Magnitude
RPK	Release Backlog
RPR	Release Planning Review
RRTS	Regulations and Rulings Tracking System

Acronym	Meaning
RS	Restricted Software
RSP	Reimbursable Services Program
RTM	Requirements Traceability Matrix
RVSS	Remote Video Surveillance Systems
S&T	Science and Technology
SA	Security Authorization
SAM	Surveillance Asset Management
SAP	Systems, Applications and Products
SAR	Security Assessment Report
SAT	Systems Acceptance Testing
SBC	Small Business Concern(s)
SCTM	Security Controls Traceability Matrix
SDD	System Design Document
SDR	Service Delivery Requirement
SEACATS	Seized Assets and Case Tracking System
SES	Sector Enforcement Specialist
SF	Standard Form
SFTP	Secure File Transfer Protocol
SIEM	Security Information Event Management
SIR	Significant Incident Report
SIT	Systems Integration Testing
SLA	Service Level Agreement(s)
SLC	System Life Cycle
SME	Subject Matter Expert
SMS	Situation Management System
SOC	Service Occupational Classifications
SOC	Security Operations Center
SOO	Statement of Objectives
SOP	Standard Operating Procedures
SORN	Privacy Act System of Records Notice
SOW	Statement of Work
SP	Security Plan
SPAD	Strategic Planning and Analysis Directorate
SPI	Schedule Performance Index
SPII	Sensitive Personally Identifiable Information
SPK	Sprint Backlog
SQA	Software Quality Assurance

Acronym	Meaning
SR	Sprint Retrospective
SRD	Sprint Review and Demonstration
SSI	Sensitive Security Information
SSN	Social Security Number
SSO	Single Sign On
SW	Special Works
T&M	Time and Materials
TAK	Team Awareness Kit
TAMS	Time and Attendance Management System
TAR	Travel Authorization Request
TASPD	Targeting & Analysis Systems Program Directorate
TBD	To Be Determined
TEB	Technical Evaluation Board
TEMP	Test and Evaluation Master Plan
TEOAF	Treasury's Executive Office of Asset Forfeitures
TFF	Treasury Forfeiture Fund
TFS	Team Foundation Server
TI	Technology Insertion
TIO	Technical Integration Office
TO	Task Order
TOA	Task Order Award
TOPM	Task Order Program Manager
TOR	Task Order Request
TOS	Tracking and Ordering System
TPA	Team Process Agreement
TPOC	Technical Point of Contact
TRM	Technical Reference Model
TRR	Test Readiness Review
TSD	Technology Service Desk
TSM	Tracking, Sign-cutting and Modeling System
U.S.	United States
U.S.C.	United States Code
UAR	User Access Request
UAS	Unmanned Aerial Systems
UAT	User Acceptance Testing
UFR	Unfunded Requirement
UFRS	Use of Force Reporting System

Acronym	Meaning
UIC	Unit Identification Code
ULPS	Universal Location Point Selector
UML2	Universal Modeling Language
UR	Unlimited Rights
URL	Uniform Resource Locator
USACE	U.S. Army Corps of Engineers
USBP	U.S. Border Patrol
USCG	U.S. Coast Guard
USCIS	U.S. Citizenship and Immigration Services
USDA	U.S. Department of Agriculture
USSS	U.S. Secret Service
VAC	Variance at Completion
VIP	Very Important Person
WAN	Wide Area Network
WAR	Weekly Activity Report(s)
WBS	Work Breakdown Structure
WCR	Web, Communications and Research
webSIRS	Web Inspection Self-Reporting System
WMG	Workforce Management Group
XD	Executive Director
XML	Extended Mark-up Language



AWARD FEE DETERMINATION PLAN (AFDP)

for

Department of Homeland Security (DHS)

US Customs and Border Protection (CBP) Office of Information and Technology (OIT)

Border Enforcement Management Systems Directorate (BEMSD)

Border Enforcement Applications for Government Leading-Edge IT (BEAGLE)

Insert Task Order Number

This AFDP is applicable to Period One (*Month Day*, 2019 - *Month Day*, 2020)

SECTION 1: INTRODUCTION

This AFDP provides procedures for evaluating the contractor's performance on the CBP OIT BEMSD Task Order (TO) on a Cost-Plus-Award-Fee (CPAF) basis for TO (*insert number*). A Quality Assurance Surveillance Plan (QASP) is required under Federal Acquisition Regulation (FAR) 46.401; this AFDP replaces the QASP for the work performed on a CPAF basis. The AFDP may be revised unilaterally by the Government at any time during the period of performance. The Government will make every attempt to provide changes to the contractor 15 workdays prior to the start of the evaluation period to which the change will apply. The AFDP may be re-evaluated each evaluation period with input from the contractor. The award fee objective for this TO is to afford the contractor the opportunity to earn award fee commensurate with optimum performance:

- a. By providing a workable AFDP with a high probability of successful implementation.
- b. By clearly communicating evaluation procedures that provide effective two-way communication between the contractor and the Government.
- c. By focusing the contractor on areas of greatest importance in order to motivate outstanding performance.

The amount of award fee earned and payable to the contractor for achieving specified levels of performance will be determined by the Award Fee Determination Official (AFDO), with the assistance of the Award Fee Evaluation Board (AFEB), per this AFDP. The maximum award fee payable for any period is 100 percent of the Award Fee Pool Allocation. The contractor may earn all, part, or none of the award fee allocated to an evaluation period.

Standard terms used in the AFDP are:

- a. Award Fee Pool: The maximum Award Fee Pool established at award.
- b. Award Fee Pool Allocation: The amount of the Award Fee Pool that is allocated and potentially earned from the Award Fee Pool for the specific award fee period subject to the AFDP.



SECTION 2: EVALUATION PERIODS

The Government will evaluate contractor performance every six months to determine the amount of award fee earned and payable to the contractor. Each CPAF labor Contract Line Item Number (CLIN) will contain two distinct six-month Award Fee Evaluation Periods during a twelve-month period. Mid-Period reviews will be scheduled concurrent with in-process reviews, as practicable.

Award Fee Evaluation Periods

CLIN(s)	PERIOD	Award Fee Evaluation Period Dates (Month Day, Year)
0001	1	September 30, 2019 – March 29, 2020
0001	2	March 30, 2020 – September 29, 2020
1001	3	September 30, 2020 – March 29, 2021
1001	4	March 30, 2021 – September 29, 2021
2001	5	September 30, 2021 – March 29, 2022
2001	6	March 30, 2022 – September 29, 2022
3001	7	September 30, 2022 – March 29, 2023
3001	8	March 30, 2023 – September 29, 2023
4001	9	September 30, 2023 – March 29, 2024
4001	10	March 30, 2024 – September 29, 2024
5001	11	September 30, 2024 – March 29, 2025
5001	12	March 30, 2025 – September 29, 2025
6001	13	September 30, 2025 – March 29, 2026
6001	14	March 30, 2026 – September 29, 2026
7001	15	September 30, 2026 – March 29, 2027
7001	16	March 30, 2027 – September 29, 2027

Commented [A1]: All dates in this column are based on an assumed TO Award date of 9/30/2019, and will be adjusted in the final award package based on the actual award date.

The Award Fee Evaluation Periods may be changed at the unilateral discretion of the Government.



SECTION 3: AWARD FEE POOL ALLOCATION FORMULA

3.1 Maximum Award Fee

The maximum Award Fee Pool for TO *(insert number)* over the life of the TO is \$(*copy maximum Award Fee Pool from award document in Section B*).

The maximum Award Fee Pool Allocation determined for each period will never exceed the matching proportional amount of Award Fee listed in TO Section B CLIN for the applicable period of performance.

3.2 Allowable Award Fee Pool Allocation Methods

There are two methods to determine the maximum Award Fee Pool Allocation for each period. The FEDSIM CO and COR should determine the best method of award fee allocation prior to the start of each award fee period.

3.2.1 Incurred Cost

Projects with variable levels of effort and surging levels of support shall be based on the incurred cost allocation methodology for the award fee period. Incurred cost data shall be provided by the contractor after the end of the Award Fee Evaluation Period, as calculated and reported by the contractor's approved Cost Accounting System using DCMA or DCAA approved, recommended, or provisional indirect billing rates. Invoiced cost shall not be used unless incurred cost is not available.

3.2.2 Planned Value

If there is a consistent budget and level of effort, the FEDSIM CO and COR may elect to switch to the Planned Value Allocation method in subsequent award fee evaluation periods. Prior to the start of an Award Fee Evaluation Period, the AFDP is incorporated into the TO by modification, identifying in Section 4 and Section 8:

- a. Planned Cost for the Award Fee Evaluation Period (Section 4).
- b. Cost Control Criteria (Section 8).
- c. Service Level Agreements (SLAs) on Cost Control encouraging reductions in cost to achieve higher award fee and/or higher return on sale (Section 8).

3.3 Prohibited Award Fee Pool Allocation Methods

3.3.1 Funded Cost

Funded cost will inherently exceed incurred cost. Award Fee Pool Allocations based on the funded cost would artificially increase the total effective award fee percentage higher than the negotiated amount at award. Funded cost shall never be utilized.

3.3.2 Estimated Cost

Estimated costs at award will inherently exceed incurred cost. Award Fee Pool Allocations based on the estimated cost would artificially increase the total award fee percentage higher than the negotiated amount at award. Estimated cost shall never be utilized.



3.3.3 Equal Distribution

Equal distribution of the maximum Award Fee Pool inherently deviates from the award fee percentage negotiated at award. Planned value and incurred cost are superior methodologies to provide a consistent and fair Award Fee Pool Allocation. Equal distribution shall never be utilized.

3.3.4 Weighted Distribution

Weighted distribution of the maximum Award Fee Pool inherently deviates from the award fee percentage negotiated at award. Planned Value and Incurred Cost are superior methodologies to provide a consistent and fair Award Fee Pool Allocation that correspond inherently to high levels of effort. Weighted distribution shall never be utilized.

3.4 First Award Fee Evaluation Period

The first Award Fee Evaluation Period for all CPAF awards will default to utilizing incurred cost to determine the Award Fee Pool Allocation. Transition activities inherently introduce level of effort variation. A Planned Value cannot be determined prior to award. In certain circumstances (e.g., when level of effort is consistent), subsequent Award Fee Evaluation Periods may use Planned Value as an alternative.



SECTION 4: AWARD FEE RESULTS REPORTING

4.1 Initial Award Fee Evaluation Period

The Award Fee Results Reporting Table is completed after the end of the first Award Fee Evaluation Period. The fields to be completed are Cost Incurred Amount (\$), Award Fee Pool Allocation Amount (\$), Earned Award Fee Percent (%), Earned Award Fee Amount (\$), and Unearned Award Fee Amount (\$).

4.2 Second and Subsequent Award Fee Evaluation Period

The fields to be completed after each Award Fee Evaluation Period are Award Fee Pool Allocation Amount, Earned Award Fee Percent, Earned Award Fee Amount, and Unearned Award Fee Amount. If Planned Value allocation was not used, the default Cost Incurred will be reported at the end of the award fee period.

If the Award Fee Pool Allocation methodology is progressing from Incurred Cost to Planned Value, the Planned Value Amount and the Anticipated Funded Cost shall be recorded in the table below prior to the start of the second evaluation period.

Award Fee Reporting Table for Planned Value

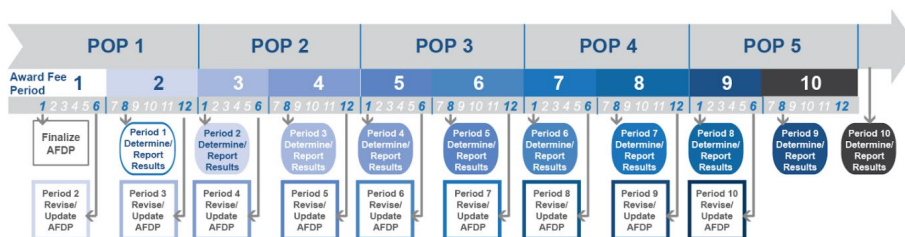
Period of Performance	Award Fee Evaluation Period	Planned Value Amount (\$)	Anticipated Funded Cost (Planned Value minus Award Fee Pool Allocation)	Cost Incurred Amount (\$)	Award Fee Pool Allocation Amount (\$)	Earned Award Fee Percent (%)	Earned Award Fee Amount (\$)	Unearned Award Fee Amount (\$)
Base Period	1							
Base Period	2							
First Option Period	3							
First Option Period	4							
Second Option Period	5							
Second Option Period	6							
Third Option Period	7							
Third Option Period	8							



Period of Performance	Award Fee Evaluation Period	Planned Value Amount (\$)	Anticipated Funded Cost (Planned Value minus Award Fee Pool Allocation)	Cost Incurred Amount (\$)	Award Fee Pool Allocation Amount (\$)	Earned Award Fee Percent (%)	Earned Award Fee Amount (\$)	Unearned Award Fee Amount (\$)
Fourth Option Period	9							
Fourth Option Period	10							
Fifth Option Period	11							
Fifth Option Period	12							
Sixth Option Period	13							
Sixth Option Period	14							
Seventh Option Period	15							
Seventh Option Period	16							

Timeline for Updating AFDP and Reporting Results

Cost Plus Award Fee Process





SECTION 5: AWARD FEE EVALUATION RATINGS

The following table shows the Award Fee Pool Allocation percentage by scores. The definition for each rating adjective is provided below.

Award Fee Pool Allocation Rating/Percentage

Adjectival Rating	Percentage of Fee
Excellent	91%-100%
Very Good	76%-90%
Good	51%-75%
Satisfactory	No Greater than 50%
Unsatisfactory	0%

The performance categories, once graded, describe the overall customer satisfaction with the tasks' key indicators. Contained in the ratings is a word picture of standards that allows each Performance Monitor to work from a common grading scale.

EXCELLENT

Contractor has exceeded almost all of the significant award-fee criteria and has met overall cost, schedule, and technical performance requirements of the contract in the aggregate as defined and measured against the criteria in the award-fee plan for the award-fee evaluation period.

VERY GOOD

Contractor has exceeded many of the significant award-fee criteria and has met overall cost, schedule, and technical performance requirements of the contract in the aggregate as defined and measured against the criteria in the award-fee plan for the award-fee evaluation period.

GOOD

Contractor has exceeded some of the significant award-fee criteria and has met overall cost, schedule, and technical performance requirements of the contract in the aggregate as defined and measured against the criteria in the award-fee plan for the award-fee evaluation period.

SATISFACTORY

Contractor has met overall, cost, schedule, and technical performance requirements of the contract in the aggregate as defined and measured against the criteria in the award-fee plan for the award-fee evaluation period.

UNSATISFACTORY

Contractor has failed to meet overall cost, schedule, and technical performance requirements of the contract in the aggregate as defined and measured against the criteria in the award-fee plan for the award-fee evaluation period.



SECTION 6: ORGANIZATIONAL STRUCTURE OF AWARD FEE DETERMINATION

6.1 Award Fee Determination Official (AFDO)

The Federal Systems Integration and Management Center (FEDSIM) Group Manager (GM) will serve as the AFDO. The FEDSIM Contracting Officer (CO) will appoint the AFDO in writing.

The AFDO's responsibilities include:

- Approving the AFDP and authorizing any changes to the AFDP throughout the life of the TO.
- Approving the members of the AFEB and appointing the AFEB Chairperson.
- Reviewing assessments of contractor performance. Feedback coordinated with the AFEB will be provided to the contractor as appropriate during the evaluation period to enhance overall performance and minimize problems.
- Determining the amount of award fee the contractor has earned based on its performance during each Award Fee Evaluation Period.

6.2 Award Fee Evaluation Board (AFEB)

The AFEB has a Chairperson (the FEDSIM COR), Client Representatives, and/or Technical Point(s) of Contact (TPOCs). Other voting members of the AFEB are representatives from the Client Organization. The FEDSIM CO is a non-voting advisory member of the AFEB. Additional non-voting board members may be Performance Monitors as deemed appropriate by the AFEB Chairperson. The following table provides the title or role of the individuals that are members of the AFEB. Substitutions are permitted in the event of a schedule conflict, subject to approval by the AFEB Chairperson. Attendance of the non-voting members is not required to convene the AFEB.

AFEB Members

Board Position	Name and Title
AFEB Chairperson	Harold Whitaker, FEDSIM COR
AFEB Voting Member	<i>Name, Client Organization, Title/Role</i>
AFEB Voting Member	<i>Name, Client Organization, Title/Role</i>
AFEB Voting Member *	<i>Name, Client Organization, Title/Role</i>
AFEB Voting Member *	<i>Name, Client Organization, Title/Role</i>
AFEB Non-Voting Member	Aaron Sannutti, FEDSIM CO
AFEB Non-Voting Member(s)	<i>Name, Client Organization, Title/Role</i>

*Optional seats. The AFEB Chairperson may appoint as many AFEB Voting members as desired but must have three voting members in addition to the AFEB Chairperson.

Non-voting members will participate in AFEB assessments of Performance Monitor evaluations and discussions of award fee recommendations. Additionally, non-voting members are allowed to submit written reports on contractor performance to the AFEB for its consideration.

The responsibilities of the AFEB are:

- Recommend to the AFDO the specific elements upon which the contractor will be evaluated for each evaluation period.



- b. Request and obtain performance information from Performance Monitors involved in observing contractor performance.
- c. Evaluate the contractor's performance and summarize its findings and recommendations for the AFDO.
- d. Recommend to the AFDO the percentage of award fee available during an evaluation period which the contractor should receive.

6.2.1 AFEB Chairperson

The responsibilities of the AFEB Chairperson are to:

- a. Conduct AFEB meetings.
- b. Resolve any inconsistencies in the AFEB evaluations.
- c. Ensure AFEB recommendations to the AFDO are timely and made in accordance with the Award Fee Agreement and this AFDP.
- d. Ensure timely payment of award fee earned by the contractor.
- e. Recommend any changes to the AFDP to the AFDO.
- f. Ensure and have overall responsibility for the proper execution of the AFDP including managing the activities of the AFEB.
- g. Exert overall responsibility for all documents and activities associated with the AFEB.
- h. Maintain the award fee files, including current copy of the AFDP, any internal procedures, Performance Monitors' reports, and any other documentation having a bearing on the AFDO's award fee decisions.

6.2.2 Performance Monitors

Government and TO support personnel will be identified by the AFEB Chairperson as Performance Monitors to aid the AFEB in making its recommendation for award fee. Performance Monitors, responsible for the technical administration of specific tasks issued under the contract, document the contractor's performance against evaluation criteria in assigned evaluation areas(s). The primary responsibilities of the Performance Monitors include:

- a. Monitoring, evaluating, and assessing contractor performance in assigned areas.
- b. Preparing evaluation reports (scorecards) that ensure a fair and accurate portrayal of the contractor's performance.
- c. Recommending changes to the AFDP to the AFEB Chairperson.

These Performance Monitors will submit written reports, as required by the AFEB Chairperson, on the contractor's performance to the AFEB for consideration. Submission of reports will be coordinated through the AFEB Chairperson. Procedures and instructions for the Performance Monitors regarding midterm and final evaluations are provided below. The final report will be comprehensive and will be completed and submitted to the AFEB Chairperson in a timely manner.



SECTION 7: AWARD FEE DETERMINATION PROCESS

The contractor shall begin each evaluation period with zero percent of the available award fee and earn award fee based on performance during the evaluation period.

7.1 Monitoring and Assessing Performance

The AFEB Chairperson will assign Performance Monitors for the major performance areas. The Performance Monitors will be selected on the basis of expertise in the prescribed performance areas and/or association with specific technical tasks. The AFEB Chairperson may assign and change Performance Monitors' assignments at any time without notice to the contractor. The AFEB Chairperson will ensure that each Performance Monitor and board member has a copy of the TO and all modifications, the AFDP, and all changes and specific instructions for assigned areas.

Performance Monitors will conduct assessments of the contractor performance in their assigned areas. Feedback coordinated with the AFEB Chairperson will be provided to the contractor as appropriate during the evaluation period to enhance overall performance and minimize problems.

7.1.1 Instructions for Performance Monitors

Performance Monitors will maintain a periodic written record of the contractor's performance, including inputs from other Government personnel, in the evaluation areas of responsibility. Performance Monitors will retain informal records used to prepare evaluation reports for 12 months after the completion of an evaluation period to support any inquiries made by the AFDO. Performance Monitors will conduct assessments in an open, objective, and cooperative spirit, so that a fair and accurate evaluation is made. Performance Monitors will make every effort to be consistent from period to period in their approach to determine recommended ratings. Positive accomplishments should be emphasized just as readily as negative ones.

- a. Performance Monitors will prepare midterm and final evaluation reports for each evaluation period during which they are Performance Monitors. The final reports will be more comprehensive than the midterm reports. The reports, at a minimum, will contain the following information:
 1. The criteria and methods used to evaluate the contractor's performance during the evaluation period.
 2. The technical, economic, and schedule environment under which the contractor was required to perform. What effect did the environment have on the contractor's performance?
 3. The contractor's major strengths and weaknesses during the evaluation period. Give examples of the contractor performance for each strength and weakness listed. Also provide the reference in the specification, statement of work, data requirement, TO, etc., that relates to each strength or weakness.
 4. A recommended rating for the evaluation period using the adjectives and definitions set forth in this AFDP. Provide concrete examples of the contractor's performance to support the recommended rating.



7.2 Exclusions

Throughout the entire evaluation period, the contractor shall present and document any exclusion to the period of performance, due to circumstances beyond the control of the contractor, to the AFEB Chairperson within ten days of the end of the award fee period. The Performance Monitors should present the exclusions (if any) to the AFEB. If necessary, the AFEB will ask the contractor to present its case. The AFEB, in conjunction with the FEDSIM CO, will make a unilateral decision as to the exclusion from the evaluation.

7.3 Contractor Monthly Performance Reports

The contractor shall prepare Monthly Performance Reports that contain data that can be used to compare against the Performance Standards stated in this AFDP. All Monthly Performance Reports, including the raw data, shall be provided to the designated Performance Monitors.

Performance Monitors will collect the Monthly Performance Reports from the contractor; they will review and analyze the reports for accuracy and, if required, provide an oral or written summary to the AFEB.

7.4 Midterm Evaluation Procedures

The purpose of the midterm evaluation is to provide the contractor a quick, concise, interim Government review of contractor performance and an opportunity to improve its performance prior to the determination of award fee earned at the end of the evaluation period. No award fee is paid based on midterm evaluations.

7.5 Final Evaluation Reports

The Performance Monitors will provide evaluations for the entire six-month evaluation period. Performance Monitors will submit final evaluation reports after the end date of the evaluation period to the AFEB Chairperson.

7.6 Contractor Self-Evaluation Presentation

The contractor may prepare a written self-assessment against the AFDP, along with the option of presenting the results to the AFEB upon request. This presentation should last no longer than one hour. A subsequent question and answer session is permissible, if necessary.

7.7 AFEB Meeting and Memorandum to the AFDO

After receipt of the contractor's self-evaluation, the AFEB will meet and evaluate all performance information it has obtained. The AFEB will review the Performance Monitors' reports and prepare an Award Fee Evaluation Report. The Award Fee Evaluation Report will be a memorandum to the AFDO with the AFEB's recommendation.

7.8 AFEB Final Report

After meeting with the contractor, the AFEB will finalize the report and present it to the AFDO. The report will recommend the award fee amount and any unresolved contractor issues to the AFDO.



7.9 Issuing Award Fee Determination Report

The AFDO will consider the final AFEB report and ensure compliance with the AFDP. The AFDO may accept, reject, or modify the AFEB recommendation. The AFDO will make the final determination of the award fee earned during the period. The AFDO's determination of the amount of award fee earned and the basis of the determination will be stated in an Award Fee Determination Report and forwarded to the FEDSIM CO for the TO file via modification.

7.10 Award Fee Determination Notice

Within 45 calendar days of the end of the Award Fee Period, the FEDSIM CO will prepare this notice to the contractor stating the amount of the award fee earned for the evaluation period. The contractor shall invoice after accepting the modification including the award fee determination and any corresponding deobligation of unearned fee.

7.11 Failure to Conduct Timely Award Fee Determinations

If the Government fails to complete the Award Fee Determination in the timeframe specified in Section 7.10 for two consecutive periods, the Government may convert the CPAF CLINs for the remaining periods of performance to Cost-Plus-Fixed-Fee (CPFF). The CPFF type will be term. The contract type conversion and fixed fee amount will be subject to negotiation (limited by any applicable statutory and regulatory maximum of ten percent).



SECTION 8: EVALUATION CRITERIA AND WEIGHTS

8.1 Award Fee Period 1 (Transition-in) Criteria and Service Level Agreements (SLAs)

Note: Section 8.1 and its sub-sections will be removed in future (Period 2 and beyond) AFDPs.

The objective of this award fee criterion is to provide an incentive to the contractor to achieve optimum performance of task order requirements and objectives in the area of Transition-in. The evaluation will consider all aspects of Task Order performance, according to the following sub-criteria and SLA.

Award Fee Areas

Weight	Evaluation Criteria
90%	Criteria 1 – Subjective Transition-in criteria
10%	Criteria 2 – Transition-in SLA(s)
100%	Total

8.1.1 Criteria 1: Subjective Transition-in criteria (90% of Period 1 award fee pool)

- Did the contractor achieve the transition-in milestones from the schedule in the agreed-upon Transition-In Plan?
- Did the contractor identify and request the necessary documents needed from the incumbent contractor to perform the transition-in activities in a timely manner?
- To what extent did the contractor successfully coordinate and integrate transition activities with the incumbent contractor during transition-in of BEAGLE?
- To what extent did the contractor successfully develop awareness and relationships, and coordinate and integrate transition activities with other enterprise service providers (ex. EDMED, ENTSD, CSPD, FS, among others)?
- To what extent did the contractor thoroughly plan for and proactively manage the CBP Background Investigation (BI) process during transition through timely identification of personnel, timely submission of quality assured documents, and diligent tracking of BI status?
- Did the contractor provide all of the Key Personnel proposed or receive the appropriate Government approval for any substitution(s)?
- Did the contractor's TO Program Manager (PM) and leadership team engage and communicate effectively with the Government and incumbent, as appropriate?
- Did the contractor create issues that were not reported and/or managed in a timely manner due to transition activities?

8.1.2 Criteria 2: Transition-in SLAs (10%)

(SLAs in chart are examples and do not indicate which SLAs will be used.)

SLA #	SLA Description
1	BI Quality and Timeliness
2	Application Availability



8.2 Post-Transition-in Criteria and Weights

Beginning with Period 2 (post-transition-in), the AFDP consists of award-fee provisions for six distinct areas. The award-fee areas are broken down as follows:

Award Fee Areas

Weight	Evaluation Criteria
30%	Criteria 1 – TO and Program Management
15%	Criteria 2 – Application Development and O&M
15%	Criteria 3 – Technology Management and Data Analytics
10%	Criteria 4 – Customer Services and User Experience
15%	Criteria 5 – Pool 1 SLAs
15%	Criteria 6 – Pool 2 SLAs
100%	Total

The criteria and weights provided above and discussed in detail below are guidelines to be used in evaluating these areas to determine the appropriate award fee. The criteria and relative percentages may be adjusted for subsequent award fee periods. Members of the AFEB and working group will use the following examples of criteria to evaluate the contractor's performance during each Award Fee Evaluation Period.

SLAs and other subjective criteria may be revised for subsequent award fee periods. Those future SLAs will be developed jointly by the contractor and Government and may replace some or all of the criteria listed below. The Government has the final responsibility for determining which SLAs will be incorporated. The Government may, at its sole discretion, move SLAs between Pools 1 and 2 prior to the start of an award fee period in order to properly incentivize the most critical metrics for the effectiveness of the BEMSD enterprise.

8.2.1 Criteria 1: TO and Program Management (30%)

The objective of this award fee criterion is to provide the contractor with an incentive to maximize the efficiency of TO operations, provide accurate tracking and accounting of TO financials and schedules, and proactively manage TO personnel to ensure programs are adequately staffed with qualified resources to meet mission requirements in an efficient manner.

- To what extent has the contractor provided the Government with visibility into the status of TO operations including, but not limited to:
 - Accurate and well-detailed cost estimates at the beginning of the option period or at the start of a new work effort.
 - Cost accrual reports and Estimates at Completion (EACs) that aid the government in financial planning and allow the Government and contractor to project future resource requirements.
 - Status of Background Investigation (BI) packages, highlighting challenges or delays in a manner that FEDSIM or BEMSD can plan with the contractor in resolving issues.



- Has contractor management taken a proactive leadership role to comprehensively plan, allocate, and integrate all program elements and resources to achieve the objectives of the BEAGLE TO?
- Has contractor management proactively mitigated or prevented problems and responded rapidly to project changes driven by Government decisions, funding, or actions?
- Has the contractor provided written and verbal communications to Government personnel (including FEDSIM and BEMSD leadership) in a clear, succinct, and timely manner that clearly highlighted significant risks, project issues, and their related impacts?
- Are TO deliverables outlines in Section F of the TOR timely, accurate, understandable, and provided in the specified format including maintenance updates or other changes?
- How effectively did the contractor achieve cost objectives and implement cost controls to ensure Government funding was used effectively? Did the contractor effectively adapt performance when necessary to best utilize limited funding?
- To what extent did the contractor maintain sufficient and qualified staff with the appropriate security clearances to achieve the mission objectives?
- To what extent did the contractor strive to maintain the Alliant 2 subcontracting goals for small-business and socioeconomic sector utilization?

8.2.2 Criteria 2: Application Development and O&M (15%)

The objective of this award fee criterion is to provide the contractor with an incentive to deliver timely, standardized, Agile-based application development and O&M services that are compliant with relevant CBP and DHS cybersecurity and system security implementation guides, frameworks, and standards. The contractor shall effectively support the configuration of Commercial-Off-the-Shelf (COTS) software, as well as provide customization, performance-tuning, and corrections for existing COTS and custom-coded applications. The contractor shall also provide effective support of Government labs, such as the BEMSD ICAD lab.

- Has the contractor provided standardized, effective, and repeatable Agile-based development methods that properly document and quantify progress using best-practice Agile tools (such as velocity metrics, burn-up/burn-down charts, among others)?
- Has the contractor effectively monitored cybersecurity and system security compliance and risk management, including Plan of Action and Milestone (POA&M) creation and resolution, and maintaining Authorities to Operate (ATOs) certificate renewals with minimal disruption to services?

8.2.3 Criteria 3: Technology Management and Data Analytics (15%)

The objective of this award fee criterion is to provide the contractor with an incentive to provide engineering and architecture support activities that modernize the BEMSD technology stack in a manner that provides increased functionality, reliability, and cost savings to the Government. The contractor shall proactively provide recommendations, plan and control migrations to support future-state operations, environments, and technology platforms. The contractor shall



also standardize SecDevOps methodology and Agile coaching for applications within the BEMSD portfolio.

- Has the contractor effectively captured and documented the operational configuration management baseline including, but not limited to, application integration touchpoints, hardware and software configurations, standard operating procedures, process documentation, and architectural and network diagrams?
- Did the contractor plan and implement application migrations in a timely and efficient manner, and execute those migrations with minimal-to-no disruption to end users?
- Has the contractor proactively identified opportunities to modernize, converge, or eliminate applications and systems in a manner that maintains and/or improves overall functionality and cost effectiveness to the Government? Did the contractor provide proposed approaches to implementing these recommendations and estimated cost savings and/or mission benefits?
- Has the contractor effectively utilized analytical methods to gather, conceptualize, and prioritize the needs of its customers in a manner that aids the standardization and consolidation of BEMSD architecture?
- Has the contractor effectively utilized business intelligence tools, methodologies, and expertise to detect trends, patterns, and non-obvious relationships in data contained in different systems, databases, and the enterprise data warehouse?

8.2.4 Criteria 4: Customer Services and User Experience (10%)

The objective of this award fee criterion is to provide the contractor with an incentive to maximize customer satisfaction with BEMSD enterprise services and operate an efficient and effective customer support structure that addresses trouble calls, resolves incident issues, and provides detailed and usable reporting to Government project managers, branch chiefs, and executives on the health and status of the BEMSD enterprise.

- Are users satisfied with the communications and interactions with the contractor?
- Are users satisfied with the timeliness and resolution of issues?
- Has the contractor provided data and reports in a timely manner that accurately reflects the status of the BEMSD enterprise?

8.2.5 Criteria 5: Pool 1 Service Level Agreements (15%)

Pool 1 SLAs include those metrics that, as determined by the Government, are the most critical to measuring the effectiveness of the BEAGLE TO and BEMSD enterprise services. In general, Pool 1 will contain no more than four (4) SLAs such that those SLAs in this pool have a higher average weight than SLAs in Pool 2.

All SLAs within Pool 1 shall be weighted equally, unless otherwise noted. See Appendix 3 of the AFDP for details on how each SLA is measured.



Pool 1 SLAs

(SLAs in chart are examples and do not indicate which SLAs will be in Pool 1.)

SLA #	SLA Description
1	BI Quality and Timeliness
2	Application Availability

8.2.6 Criteria 6: Pool 2 Service Level Agreements (15%)

Pool 2 contains the remaining SLAs not found in Pool 1. Pool 2 SLAs are important for measuring the effectiveness of the BEAGLE TO and BEMSD enterprise services, but the Pool 2 SLAs do not rise to the same criticality as those within Pool 1.

All SLAs within Pool 2 shall be weighted equally, unless otherwise noted. See Appendix 3 of the AFDP for details on how each SLA is measured.

Pool 2 SLAs

(SLAs in chart are examples and do not indicate which SLAs will be in Pool 2.)

SLA #	SLA Description
3	O&M Efficiency Savings
4	Accuracy of Cost Estimates



APPENDIX 1: AFEB Summary Evaluation Report

Date: _____

AFEB Chairperson Name: _____

Award Fee Period: *(insert from date)* _____ *(insert to date)* _____
(Attach additional pages, supporting data, etc. as needed.)

Criteria 1 – TO and Program Management: Rating Adjective/Performance Points

Discussion: _____

Strengths: _____

Weaknesses: _____

Criteria 2 – Application Development and O&M: Rating Adjective/Performance Points

Discussion: _____

Strengths: _____

Weaknesses: _____

Criteria 3 – Technology Management and Data Analytics: Rating Adjective/Performance Points

Discussion: _____

Strengths: _____

Weaknesses: _____

Criteria 4 – Customer Services and User Experience: Rating Adjective/Performance Points

Discussion: _____

Strengths: _____

Weaknesses: _____

Award fee rating recommended for this evaluation criteria and period of performance with recommended percentage earned.

AFEB Chairperson Signature: _____ Date: _____



APPENDIX 2: AFEB Evaluator's Report

Instructions: Evaluators are requested to use bulleted format for submitting strengths, weaknesses, and recommendations. Also, evaluators are encouraged to attach additional sheets, supporting data, etc. for the final report.

Date: _____

Evaluator Name and Title: _____

Award Fee Period: *(insert from date)* _____ – *(insert to date)* _____

Evaluator's Primary Task Area(s) (check all that apply):

<input type="checkbox"/>	Criteria 1 – TO and Program Management
<input type="checkbox"/>	Criteria 2 – Application Development and O&M
<input type="checkbox"/>	Criteria 3 – Technology Management and Data Analytics
<input type="checkbox"/>	Criteria 4 – Customer Services and User Experience

Note: Evaluators are NOT limited to evaluating only their own task areas. Experiences in other areas should also be evaluated. However, please indicate in the boxes above your primary area(s) of responsibility.

Special circumstances during this period and the impact:

- a. _____
- b. _____

Strengths of the contractor's performance:

- a. _____
- b. _____

Weaknesses in the contractor's performance (with examples and contract references):

- a. _____
- b. _____

Impact of the contractor's performance on execution of the program:

- a. _____
- b. _____

Corrective actions recommended, if any:

- a. _____
- b. _____

Award fee rating recommended for this evaluation criteria and period of performance (with supporting examples):

- a. _____
- b. _____

Evaluator Signature: _____ Date: _____



APPENDIX 3: BEAGLE SLA Template

Instructions: The contractor shall use the format below to describe the SLA and document the conditions, exceptions, performance level metrics, method(s) for measuring the SLA, the period of measurement, and method of reporting the measurement.

SLA (# here): SLA TITLE			
DESCRIPTION: <i>Succinctly summarize the objective of the SLA and its benefit to the Government (two sentences maximum).</i>			
CONDITIONS: 1. List conditions for the SLA measurement (ex. requires X number of reportable events per period to be measured; assumptions outside of the contractor's control).			
EXCEPTIONS: 1. List exceptions that would cause the SLA to become non-reportable.			
Metric Achievement Ranges		Unit:	Ex. percentage, # of incidents, etc.
Excellent	Insert ranges for each level, ensuring that ranges do not overlap.	How Measured:	List the specific tool(s) or method(s) used to track the data associated with this SLA.
Very Good		Period:	6-month award fee period (if other, list)
Good		Metric:	In a <i>detailed</i> manner, describe how the SLA metric is calculated.
Satisfactory		Reported:	Describe what report(s) or tool(s) will be used to report the SLA metrics.
Unsatisfactory			



ATTACHMENT E
PROBLEM NOTIFICATION REPORT (PNR)

Task Order Number:	47QFCAXXXXXXXX
FEDSIM COR was verbally notified on:	[Notify the FEDSIM COR as soon as it becomes apparent that a scheduled delivery will be late.]
Date PNR Submitted:	[insert Month Day, Year]

Nature and Source of Problem:
[Provide a detailed description of the nature and source of the problem. Attach additional pages, if necessary.]
Is action required by the Government?
Yes/No [If Yes, describe Government action required and date required.]
Will the problem impact delivery schedule?
Yes/No [If Yes, identify which deliverables will be affected and extent of the delay, the rationale for late delivery, and overall project impact.]
Can required delivery be brought back on schedule?
Yes/No [Explain]
Describe corrective action needed to resolve problems:
[Provide a detailed description of corrective action needed to resolve the problem. Attach additional pages, if necessary.]
When will corrective action be completed?
[Provide the new delivery schedule and anticipated completion date.]
Are increased costs anticipated?
Yes/No [If Yes, identify the amount and nature of the increased costs anticipated and define Government responsibility for problems and costs.]



ATTACHMENT F
MONTHLY STATUS REPORT FOR (INSERT MONTH AND YEAR)

Contractor Name:	
Task Order Number:	
Report Prepared by:	
Reporting Period:	From: [Month Day, Year] To: [Month Day, Year]

WORK PLANNED FOR THE MONTH:

WORK COMPLETED DURING THE MONTH:

WORK NOT COMPLETED DURING THE MONTH:

WORK PLANNED FOR NEXT MONTH:

CONTRACT MEETINGS:

[Include the meeting date, meeting subject, persons in attendance, and duration of the meeting.]

DELIVERABLE STATUS:

ISSUES/QUESTIONS/RECOMMENDATIONS:



RISKS:

[Indicate potential risks and their probability, impact, and proposed mitigation strategy.]

FUNDS/HOURS EXPENDED:

[Indicate total hours expended by the contractor during the week and total funds expended by the contractor during the week.]



**ATTACHMENT G
TRIP REPORT TEMPLATE**

Trip Report Date:	[Trip Report shall be completed within 10 workdays following completion of each trip (unless specified otherwise in Section F).]	
Project Name:		
Task Order Number:	47QFCAXXXXXXXXXX	
Name of Traveler	[Provide First and Last name of Traveler]	
Location of Travel	From: [Origin]	To: [Destination]
Duration of Trip	From: [insert Month Day, Year]	To: [insert Month Day, Year]
Point of Contact (POC) at Travel Location	[Provide First and Last name of POC]	
Government Approval Authority Received	[Provide Travel Authorization Request (TAR) Number]	
Total Cost of the Trip	\$	

Purpose of the Trip
[Provide a detailed description of the purpose of the trip. Attach additional pages, if necessary.]
Knowledge Gained
[Provide a detailed description of any knowledge gained. Attach additional pages, if necessary.]
Comments, Conclusions, Action Items:
[Provide any additional comments, conclusions, or action items. Attach additional pages, if necessary.]

ATTACHMENT H

DELIVERABLE ACCEPTANCE/REJECTION FORM

Dear [insert FEDSIM Contracting Officer's Representative (COR) Name]:

Please review the deliverable identified below, provide any comments in the space provided or on an attached form, and sign and date. Comments are due by [insert Month Day, Year].

DELIVERABLE NAME:	
AGENCY NAME:	
PROJECT NAME:	
FEDSIM TASK ORDER/ CONTRACT NUMBER:	
FEDSIM PROJECT NUMBER:	
DELIVERABLE DUE DATE:	

I have reviewed the aforementioned document and have:

- ☐ Accepted without comments
- ☐ Accepted with comments
- ☐ Rejected with comments

COMMENTS:

Signature

Date



Harold Whitaker - QF0B1FA <harold.whitaker@gsa.gov>

Access Granted for CBP BEMSD BEAGLE electronic Reading Room (eRR)

1 message

Harold Whitaker - QF0B1FA <harold.whitaker@gsa.gov>
To: BEAGLE FEDSIM IPT <BEAGLE.FEDSIM@gsa.gov>

Wed, Jul 3, 2019 at 3:35 PM

Good afternoon Industry Partners,

Thank you for registering for access to the CBP BEMSD Border Enforcement Applications for Government Leading-Edge IT (BEAGLE) electronic Reading Room (eRR). Those of you receiving this email have now been granted access to all documents in the eRR.

Per the Rules of Behavior which you signed, and which are also in the eRR, **you may not copy, print, or download any of the files in the BEAGLE eRR**. Security settings have been placed on each document to prevent readers from doing anything other than viewing the documents.

The BEAGLE eRR Google Drive folder can be accessed at the link below:

<https://drive.google.com/drive/u/0/folders/1jsHCGJoUdLW2UISQ224yhaGybONzBOFz>

If further documents are added, the FEDSIM Contracting Officer will issue an amendment to the Advance Notice to notify industry.

If you have any questions, please reach out to BEAGLE.FEDSIM@gsa.gov.

Best,

Harold Whitaker

Project Manager | Homeland Group 1 (Cyber)

Federal Systems Integration and Management Center (FEDSIM)

Mobile: 202.705.7470

harold.whitaker@gsa.gov

FEDSIM is a part of the Office of Assisted Acquisition Services within the Federal Acquisition Service of the General Services Administration



**CBP OIT BEMSD “BEAGLE” ATTACHMENT K
ORGANIZATIONAL CONFLICT OF INTEREST (OCI) STATEMENT**

The offeror and each subcontractor, consultant, and/or teaming partner shall complete and sign an Organizational Conflict of Interest (OCI) Statement. All information pertaining to OCI is outlined in Section H.7 of solicitation 47QFCA19R0029.

The contractor shall represent either that:

1. It is not aware of any facts that create any actual or potential OCI relating to the award of this contract, or
2. It has included information in its proposal, providing all current information bearing on the existence of any actual or potential OCI.

If a contractor with an actual or potential OCI believes the conflict can be avoided, neutralized, or mitigated, the contractor shall submit a mitigation plan to the Government for review.

Definition: FAR 2.101 “Organizational conflict of interest” means that because of other activities or relationships with other persons, a person is unable or potentially unable to render impartial assistance or advice to the Government, or the person’s objectivity in performing the contract work is or might be otherwise impaired, or a person has an unfair competitive advantage.

SAMPLE 1 – OFFEROR OCI STATEMENT

The following is an example of the OCI statement that each offeror shall complete and sign. All information pertaining to OCI is outlined in Section H.X.X.

(Insert Offeror Name) is responding to Task Order Request (TOR) *(Insert Task Order number e.g., GSQ0016ABC123)* for services supporting the *(Insert Client Agency's Task Order requirement)*. In accordance with solicitation Section H.X.X, *(Inset Offeror Name)* has reviewed the requirements of the TOR and the Federal Acquisition Regulation (FAR) Subpart 9.5.

(Insert Offeror Name) is not aware of any facts which create any actual or potential OCI relating to the award of this contract. *(Insert Offeror Name)* agrees to immediately disclose all information concerning any actual or potential OCI during the performance of the Task Order.

Insert Offeror Name

*Insert Offeror Point of Contact (POC) Name**

Date

POC Title

*Person must have the authority to bind the company.

SAMPLE 2 – SUBCONTRACTOR, CONSULTANT, TEAMING PARTNER OCI STATEMENT

The following is an example of the OCI statement that each subcontractor, consultant, and teaming partner shall complete and sign. All information pertaining to OCI is outlined in Section H.X.X.

(Insert Company Name) is participating as a subcontractor to *(Insert Offeror Name)* in response to Task Order Request (TOR) *(Insert Task Order number e.g., GSQ0016ABC123)* for services supporting the *(Insert Client Agency's Task Order requirement)*. In accordance with solicitation Section H.X.X, *(Insert Company Name)* has reviewed the requirements of the TOR and the Federal Acquisition Regulation (FAR) Subpart 9.5.

(Insert Company Name) is not aware of any facts which create any actual or potential OCI relating to the award of this contract. *(Insert Company Name)* agrees to immediately disclose all information concerning any actual or potential OCI during the performance of the Task Order.

Subcontractor, Consultant, Teaming Partner

*Point of Contact (POC) Name**

Date

POC Title

*Person must have the authority to bind the company.



ATTACHMENT L - NON-DISCLOSURE AGREEMENT (NDA)
BETWEEN
U.S. GENERAL SERVICES ADMINISTRATION (GSA)
FEDERAL SYSTEMS INTEGRATION AND MANAGEMENT CENTER (FEDSIM)
AND
[CONTRACTOR]

This agreement, made and entered into this _____ day of _____, 20XX (the “Effective Date”), is by and between GSA and [CONTRACTOR].

WHEREAS, [CONTRACTOR] and GSA FEDSIM have entered into Contract Number [INSERT], Task Order Number [INSERT] for services supporting the [CLIENT AGENCY AND PROGRAM/PROJECT NAME];

WHEREAS, [CONTRACTOR] is providing [DESCRIPTION (e.g., consulting/professional IT, engineering)] services under the Task Order;

WHEREAS, the services required to support [PROGRAM/PROJECT NAME] involve certain information which the Government considers to be “Confidential Information”¹ as defined herein;

WHEREAS, GSA desires to have [CONTRACTOR]’s support to accomplish the Task Order services and, therefore, must grant access to the Confidential Information;

WHEREAS, [CONTRACTOR] through its work at a Government site may have access to Government systems or encounter information unrelated to performance of the Task Order which also is considered to be Confidential Information as defined herein;

WHEREAS, GSA on behalf of [CLIENT AGENCY] desires to protect the confidentiality and use of such Confidential Information;

NOW, THEREFORE, for and in consideration of the mutual promises contained herein, the parties agree as follows:

- 1. Definitions.** “Confidential Information” shall mean any of the following: (1) “contractor bid or proposal information” and “source selection information” as those terms are defined in 41 U.S.C. § 2101; (2) the trade secrets or proprietary information of other companies; (3) other information, whether owned or developed by the Government, that has not been previously made available to the public, such as the requirements, funding or budgeting data of the Government; and *for contracts/orders providing acquisition assistance*, this term specifically includes (4) past performance information, actual/proposed costs, overhead rates, profit, award fee determinations, contractor employee data of offerors/contractors, methods or procedures used to evaluate performance, assessments, ratings or deliberations developed in an evaluation process, the substance of any discussions or deliberations in an evaluation process, and any recommendations or decisions of the Government unless and until such decisions are publicly announced. This term is limited to unclassified information.

¹ This does not denote an official security classification.

2. **Limitations on Disclosure.** [CONTRACTOR] agrees (and the [CONTRACTOR] Task Order personnel must agree by separate written agreement with [CONTRACTOR]) not to distribute, disclose or disseminate Confidential Information to unauthorized personnel under the Task Order.
3. **Agreements with Employees and Subcontractors.** [CONTRACTOR] will require its employees and any subcontractors or subcontractor employees performing services for this Task Order to sign non-disclosure agreements obligating each employee/subcontractor employee to comply with the terms of this agreement. [CONTRACTOR] shall maintain copies of each agreement on file and furnish them to the Government upon request.
4. **Statutory Restrictions Relating to Procurement Information.** [CONTRACTOR] acknowledges that certain Confidential Information may be subject to restrictions in Section 27 of the Office of Federal Procurement Policy Act (41 U.S.C. § 2104), as amended, and disclosures may result in criminal, civil, and/or administrative penalties. In addition, [CONTRACTOR] acknowledges that 18 U.S.C. § 1905, a criminal statute, bars an employee of a private sector organization from divulging certain confidential business information unless authorized by law.
5. **Limitations on Use of Confidential Information.** [CONTRACTOR] may obtain Confidential Information through performance of the Task Order orally or in writing. These disclosures or this access to information is being made upon the basis of the confidential relationship between the parties and, unless specifically authorized in accordance with this agreement, [CONTRACTOR] will:
 - a. Use such Confidential Information for the sole purpose of performing the [PROGRAM/PROJECT] support requirements detailed in the Task Order and for no other purpose;
 - b. Not make any copies of Confidential Information, in whole or in part;
 - c. Promptly notify GSA in writing of any unauthorized misappropriation, disclosure, or use by any person of the Confidential Information which may come to its attention and take all steps reasonably necessary to limit, stop or otherwise remedy such misappropriation, disclosure, or use caused or permitted by a [CONTRACTOR] employee.
6. **Duties Respecting Third Parties.** If [CONTRACTOR] will have access to the proprietary information of other companies in performing Task Order support services for the Government, [CONTRACTOR] shall enter into agreements with the other companies to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished. [CONTRACTOR] agrees to maintain copies of these third party agreements and furnish them to the Government upon request in accordance with 48 C.F.R. § 9.505-4(b).
7. **Notice Concerning Organizational Conflicts of Interest.** [CONTRACTOR] agrees that distribution, disclosure or dissemination of Confidential Information (whether authorized or unauthorized) within its corporate organization or affiliates, may lead to disqualification from participation in future Government procurements under the organizational conflict of interest rules of 48 C.F.R. § 9.5.
8. **Entire Agreement.** This Agreement constitutes the entire agreement between the parties and supersedes any prior or contemporaneous oral or written representations with regard to



protection of Confidential Information in performance of the subject Task Order. This Agreement may not be modified except in writing signed by both parties.

9. Governing Law. The laws of the United States shall govern this agreement.

10. Severability. If any provision of this Agreement is invalid or unenforceable under the applicable law, the remaining provisions shall remain in effect.

In accordance with Public Law No. 108-447, Consolidated Act, 2005, the following is applicable:

These restrictions are consistent with and do not supersede, conflict with, or otherwise alter the employee obligations, rights, or liabilities created by Executive Order No. 12958; section 7211 of title 5, United States Code (governing disclosures to Congress); section 1034 of title 10, United States Code, as amended by the Military Whistleblower Protection Act (governing disclosure to Congress by members of the military); section 2302(b)(8) of title 5, United States Code, as amended by the Whistleblower Protection Act (governing disclosures of illegality, waste, fraud, abuse or public health or safety threats); the Intelligence Identities Protection Act of 1982 (50 U.S.C. 421 et seq.) (governing disclosures that could expose confidential Government agents); and the statutes which protect against disclosure that may compromise the national security, including sections 641, 793, 794, 798, and 952 of title 18, United States Code, and section 4(b) of the Subversive Activities Act of 1950 (50 U.S.C. 783(b)). The definitions, requirements, obligations, rights, sanctions, and liabilities created by said Executive order and listed statutes are incorporated into this agreement and are controlling.

11. Beneficiaries. If information owned by an individual or entity not a party to this agreement is disclosed or misappropriated by [*CONTRACTOR*] in breach of this agreement, such information owner is a third party beneficiary of this agreement. However, nothing herein shall create an independent right of action against the U.S. Government by any third party.

IN WITNESS WHEREOF, GSA and [*CONTRACTOR*] have caused the Agreement to be executed as of the day and year first written above.

UNITED STATES GENERAL SERVICES ADMINISTRATION

Name

Date

Contracting Officer

[*CONTRACTOR*]

Name*

Date

Title

*Person must have the authority to bind the company.



TRAVEL AUTHORIZATION REQUEST (TAR)

Contractor:
Client:

TAR Number:
Date:
Project Name: CBP OIT BEMSD BEAGLE
Project/Interagency Agreement (IA) Number: 47QFCA19S0040
Associated Line of Accounting: FEDSIM Project # HS01037
Task Order Number:

			Last Invoice Submitted:
TO:	<i>(Insert First and Last Name)</i> , FEDSIM Contracting Officer Representative (COR)	CLIN X003	
		VALUE:	\$ -
		CUMULATIVE	
		AMOUNT	\$ -
		BILLED:	
		CURRENT	
FROM:	<i>(Insert First and Last Name of requestor)</i>	CLIN X003	\$ -
		BALANCE:	
THROUGH:	Linda D. Baker, CBP OIT BEMSD Technical Point of Contact (TPOC)	TAR	
		ESTIMATE:	\$ -
		NEW CLIN	
		X003	\$ -
		BALANCE:	
SUBJECT:	Travel Authorization Request # <i>(insert number)</i>		
DATE:	<i>(Insert date)</i>		

**PURPOSE/JUSTIFICATION OF REQUEST:**

--

Traveler:

Name	Company

Travel Itinerary:

Departure:	Date	Origin/Destination		Return:		Date	Origin/Destination
Leave				Leave			
Arrive				Arrive			
Leave				Leave			
Arrive				Arrive			

	Estimated Cost
Travel (CLIN X003)	\$ -
Airfare: @	\$ -
Per Diem: @	\$ -
Hotel: @	\$ -
Other: <i>(insert as appropriate; i.e. car rental)</i>	\$ -
Other Direct Costs (CLIN X005)	
<i>(Insert as appropriate)</i>	\$ -
Subtotal Amount	\$ -



Indirect Handling Cost	\$ -
General & Administrative (G&A) Cost	\$ -
Total Travel Cost (CLIN X003)	\$ -
Total ODC Cost (CLIN X005)	\$ -
Total Trip Cost NTE	\$ -

Remarks:

The estimated cost of travel must represent the contractor's best estimate. The amount obligated for this line item may be increased unilaterally by the Government if such action is deemed advantageous. Travel costs shall be reimbursed in accordance with Federal Travel Regulations (FTR) and Joint Travel Regulations (JTR). Please note that a separate TAR should be submitted for each individual traveler.

Please contact me at (area code) 000-0000 (*insert requestor's phone number*) if you have any concerns or questions.

Contractor Requestor:	FEDSIM COR Approval:	CBP OIT BEMSD TPOC Acceptance:
Signature Date	Signature Date	Signature Date



REQUEST TO INITIATE PURCHASE (RIP) FOR EQUIPMENT, MATERIALS, OTHER DIRECT COSTS (ODCs), AND/OR SERVICES

If the prime contractor has an approved purchasing system, the contractor shall prepare and submit a RIP to be reviewed and signed by the FEDSIM COR.

Contractor:
Client:

RIP Number:
Date:
Project Name:
**Project/Interagency
Agreement (IA)
Number:**
**Associated Line of
Accounting:**
Task Order Number:

		Last Invoice Submitted:	
TO:	<i>(Insert First and Last Name)</i> , FEDSIM Contracting Officer's Representative (COR)	CLIN X004/X005 VALUE:	\$ -
		CUMULATIVE AMOUNT BILLED:	\$ -
FROM:	<i>(Insert First and Last Name of requestor)</i>	CURRENT CLIN X004/X005 BALANCE:	\$ -
THROUGH:	Linda D. Baker, CBP OIT BEMSD Technical Point of Contact (TPOC)	RIP ESTIMATE:	\$ -
		NEW CLIN X004/X005 BALANCE:	\$ -
SUBJECT:	Request to Initiate Purchase # <i>(insert number)</i>		
DATE:	<i>(Insert Month Date, Year)</i>		



PURPOSE/JUSTIFICATION OF REQUEST:

ESTIMATED PURCHASE COST:

Item: <i>(insert item(s))</i>		
Item Cost	\$	-
Indirect costs authorized by the Task Order <i>(insert as appropriate)</i>	\$	-
Total Not to Exceed (NTE) cost	\$	-

All equipment, materials, and ODCs shall be purchased in accordance with client requirements. All equipment, materials, and ODCs shall become the property of the Government and shall be regarded as Government Furnished Property (GFP), and unless previously approved by the Contracting Officer, shall be used only in performance of this Task Order. All materials shall be purchased in accordance with



applicable Federal Acquisition Regulation (FAR) and/or Defense Federal Acquisition Regulation Supplement (DFARS) clauses (*choose as appropriate*) and approved purchasing procedures. All equipment, materials, and ODCs shall be purchased in accordance with Task Order requirements and shall not exceed the funded amount on this Task Order. The contractor shall ensure that the prices quoted are fair and reasonable at the time of submission and are in the best interest of the Government.

Please contact me at (area code) 000-0000 (*insert requestor's phone number*) if you have any concerns or questions.

FEDSIM COR Approval:	
Signature	Date



CONSENT TO PURCHASE PARTS/TOOLS/ODCs AND/OR SERVICES (CTP)

Industry Partner:

Client:

TOOL#:

Date:

Project Name:

Project/IA#:

Contract/Task Order:

If the prime contractor does not have an approved purchasing system, the contractor will prepare and submit a Consent to Purchase (CTP), to be reviewed by the COR and signed by the CO.

TO: FEDSIM Contracting Officer Representative

FROM: Requestor

THROUGH: Linda D. Baker, CBP OIT BEMSD TPOC

SUBJECT: Consent to purchase #

Last Inv submitted:

CLIN # VALUE: \$0.00

CUM AMT BILLED: \$0.00

BALANCE: \$0.00

CTP ESTIMATE: \$0.00

BALANCE: \$0.00

Client Point of Contact:

PURPOSE/JUSTIFICATION OF REQUEST:

The purpose of this request is to

Description of supplies or services (FAR 52.244-2(e)(1)(i)):

Type of subcontract (FAR 52.244-2(e)(1)(ii)):



Propose subcontractor (FAR 52.244-2(e)(1)(iii)):

Below is the estimated cost of purchase (FAR 52.244-2(e)(1)(iv)):

ITEM	
Tool (CLIN #):	
Cost to Government: @#	\$ -
Fee	\$ -
General & Administrative (G&A) Cost	\$ -
Total Cost NTE:	\$ -

All material purchases shall be made in accordance with customer requirements. All materials shall become the property of the Government and shall be regarded as Government Furnished Property (GFP), and unless previously approved by the Contracting Officer, shall be used only in performance of this Task Order. All materials will be purchased in accordance with regulations contained in FAR 52.244-2 approved purchasing procedures. All Tools and ODCs shall be procured in accordance with contract requirements and shall not exceed the funded amount on this contract.

It is the responsibility of the Industry Partner to ensure that the prices quoted are fair and reasonable at the time of submission and are in the best interest of the client. The Industry Partner is to furnish price quotes for hardware and software purchases.

The following documents are attached (as necessary):

- 1) Subcontractor's certified cost or pricing data as required in FAR 52.244-2(e)(1)(v)
- 2) Subcontractor's Disclosure Statement or Certification relating to Cost Accounting Standards as required in FAR 52.244-2(e)(1)(vi)
- 3) Negotiation memo as required in FAR 52.244-2(e)(1)(vii)

Please contact me at (000) 000-0000 if you have any concerns or questions.

FEDSIM CO Approval:

Signature

Date

Attachment P - BEAGLE Sub-CLIN Structure for Applications and Tasks

Branch	Application/Task	Sub-CLIN
BES	ACMSnet	aa
BES	ACS Collections MF Support	ab
BES	BES Mgmt	ac
BES	BDW Reporting	ad
BES	Big Pipe	ae
BES	FACTS	af
BES	JICMS	ag
BES	JICMS Modernization	ah
BES	SEACATS	ai
BES	SEACATS DME	aj
BES	TOMIS	al
BPS	BPES Management	ba
BPS	e3	bb
BPS	eGIS	bc
BPS	BPETS	bd
BPS	CGAP	be
BPS	ESTAR	bf
BPS	ORBBP	bg
BPS	SIR	bh
BPS	SSO	bi
BPS	ICAD	bj
BPS	TAK	bk
MSB	AST	ca
MSB	COSS Transformation Initiative (CTI)	cb
MSB	FITT	cc
MSB	K9TS	cd
MSB	Maximo	ce
MSB	AMFAMS	cf
MSB	NIMS/CMAX	cg
MSB	Remedy	ch
MSB	RevMod	ci
MSB	SAP	cj
MSB	Countermeasures (SMART)	ck
MSB	SMS	cl
MSB	TRIRIGA	cm
MSB	Workbench	cn
PCO	BEMS Admin Support	da
PCO	BEMS Vendor Pgm Mgmt	db
PCO	CSPD Security Audit	dc
TIO	CAPS (SMART)	ea
TIO	Cornerstone	eb

TIO	CMS (Complaints Management System)	ec
TIO	CM/QM/Agile	ed
TIO	OpStar	ee
TIO	TIO Architecture/Cloud	ef
TIO	BEMSD Security	eg
TIO	TIO Testing	eh
WCR	AWT	fa
WCR	BWT	fb
WCR	CBP TRACKING 2	fc
WCR	CCTS	fd
WCR	CEI	fe
WCR	CERENADE	ff
WCR	CGOVAPPS	fg
WCR	CTPAT	fh
WCR	Drupal	fi
WCR	IPR	fj
WCR	IRC	fk
WCR	MS Project	fl
WCR	Office of Trade WCR OM	fm
WCR	OFO Targeting Ticker	fn
WCR	OTD Mentoring Portal	fo
WCR	Pre-Clearance (PQT)	fp
WCR	QUICS	fq
WCR	RA (Access Control)	fr
WCR	RRTS	fs
WCR	RSP	ft
WCR	Salesforce	fu
WCR	SharePoint	fv
WCR	Trade Events	fw
WCR	webSIRS	fx
WCR	webTELE	fy
WCR	WCR Contract Mgmt	fz

Total Price Summary

Company Name:

CLIN	CLIN Type	Description	Amount
BASE Period			
0001	CPAF	Labor - Tasks 1,2,3,4,5,6,7,8	\$ -
0002	CPAF	Labor - Task 9	\$ 60,300,000.00
0003	NTE	Travel	\$ 1,000,000.00
0004	NTE	Tools	\$ 25,000,000.00
0005	NTE	ODCs	\$ 5,000,000.00
0006	NTE	CAF	\$ 100,000.00
Total Base Period			\$ -
OPTION Period ONE			
1001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
1002	CPAF	Labor - Task 9	\$ 60,300,000.00
1003	NTE	Travel	\$ 1,000,000.00
1004	NTE	Tools	\$ 25,000,000.00
1005	NTE	ODCs	\$ 5,000,000.00
1006	NTE	CAF	\$ 100,000.00
Total Option Period One			\$ -
OPTION Period TWO			
2001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
2002	CPAF	Labor - Task 9	\$ 60,300,000.00
2003	NTE	Travel	\$ 1,000,000.00
2004	NTE	Tools	\$ 25,000,000.00
2005	NTE	ODCs	\$ 5,000,000.00
2006	NTE	CAF	\$ 100,000.00
Total Option Period Two			\$ -
OPTION Period THREE			
3001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
3002	CPAF	Labor - Task 9	\$ 60,300,000.00
3003	NTE	Travel	\$ 1,000,000.00
3004	NTE	Tools	\$ 25,000,000.00
3005	NTE	ODCs	\$ 5,000,000.00
3006	NTE	CAF	\$ 100,000.00
Total Option Period Three			\$ -
OPTION Period FOUR			
4001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
4002	CPAF	Labor - Task 9	\$ 60,300,000.00
4003	NTE	Travel	\$ 1,000,000.00
4004	NTE	Tools	\$ 25,000,000.00
4005	NTE	ODCs	\$ 5,000,000.00
4006	NTE	CAF	\$ 100,000.00

Total Option Period Four			\$ -
OPTION Period FIVE			
5001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
5002	CPAF	Labor - Task 9	\$ 60,300,000.00
5003	NTE	Travel	\$ 1,000,000.00
5004	NTE	Tools	\$ 25,000,000.00
5005	NTE	ODCs	\$ 5,000,000.00
5006	NTE	CAF	\$ 100,000.00
Total Option Period Five			\$ -
OPTION Period SIX			
6001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
6002	CPAF	Labor - Task 9	\$ 60,300,000.00
6003	NTE	Travel	\$ 1,000,000.00
6004	NTE	Tools	\$ 25,000,000.00
6005	NTE	ODCs	\$ 5,000,000.00
6006	NTE	CAF	\$ 100,000.00
Total Option Period Six			\$ -
OPTION Period SEVEN			
7001	CPAF	Labor - Tasks 1,3,4,5,6,7,8	\$ -
7002	CPAF	Labor - Task 9	\$ 60,300,000.00
7003	NTE	Travel	\$ 1,000,000.00
7004	NTE	Tools	\$ 25,000,000.00
7005	NTE	ODCs	\$ 5,000,000.00
7006	NTE	CAF	\$ 100,000.00
Total Option Period Seven			\$ -
CLIN 0007 (Transition Out)	CPAF	Labor - Task 2	-
CLIN TOTALS	CPAF	Labor - Tasks 1,2,3,4,5,6,7,8	\$ -
	CPAF	Labor - Task 9	\$ 482,400,000.00
	NTE	Travel	\$ 8,000,000.00
	NTE	Tools	\$ 200,000,000.00
	NTE	ODCs	\$ 40,000,000.00
	NTE	CAF	\$ 800,000.00
GRAND TOTAL			\$ -

Direct Labor Rate Summary

Company Name:

KEY PERSONNEL

Task	Individuals Name	Key Postion as Indentified in Section H.1 of the TOR	Labor Category Identifier	Corporate Labor Category	Alliant 2 Labor Category	Base Year: Proposed Unburdened Direct Labor Rate (\$)
Applicable Task number or numbers 1,2,3, Etc..		e.g. Task Order Porgram Manager	If possible please provide the internal identifier number, job code etc.. that a DCAA audit or cognizant agency uses to identify an individual labor rates if a rate recommendation or forward price rate agreement is established. This information will assist the Evaluator in mapping labor rates - OR - identify that the rate is based on actual salary	e.g. SME - Manager Group 1	e.g. SME - Manager Group 1	

ALL Other Labor Rates (Non-Key)

Task	Individuals Name if applicable	Labor Category Identifier	Corporate Labor Category	Alliant 2 Labor Category	Base Year: Proposed Unburdened Direct Labor Rate (\$)
Applicable Task number or numbers 1,2,3, Etc..		If possible please provide the internal identifier number, job code etc.. that a DCAA audit or cognizant agency uses to identify an individual labor rates if a rate recommendation or forward price rate agreement is established. This information will assist the Evaluator in mapping labor rates - OR - identify that the rate is based on actual salary	e.g. SME - Manager Group 1	e.g. SME - Manager Group 1	

Escalation Rate Summary

Company Name:

Base Period	Option Year One 1	Option Year Two	Option Year Three	Option Year Four	Option Year Five	Option Year Six	Option Year Seven
%	%	%	%	%	%	%	%

Cost Reimbursement (CR) CLINs						
Costs incurred may be burdened with the contractor's indirect/material handling rate in accordance with TOR Section B.5						
All costs shall be fully supported by the narrative in the Cost/Price Supporting Documentation.						
CLIN	Description	Base Period	First Option Period	Second Option Period	Third Option Period	Fourth Option Period
X003	CR Long-Distance Travel	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]
X004	CR Tools	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]
X005	CR Other Direct Costs (ODCs)	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]	[insert rate %]

Labor Hour Summary*Company Name:*

	CLIN Type	Number of Hours
Base Period		
CLIN 0001 Task 1	CPAF	
CLIN 0001 Task 2	CPAF	
CLIN 0001 Task 3	CPAF	
CLIN 0001 Task 4	CPAF	
CLIN 0001 Task 5	CPAF	
CLIN 0001 Task 6	CPAF	
CLIN 0001 Task 7	CPAF	
CLIN 0001 Task 8	CPAF	
CLIN 0001 Total	CPAF	
Base Period Total Hours		
Option Period One		
CLIN 1001 Task 1	CPAF	
CLIN 1001 Task 2	CPAF	
CLIN 1001 Task 3	CPAF	
CLIN 1001 Task 4	CPAF	
CLIN 1001 Task 5	CPAF	
CLIN 1001 Task 6	CPAF	
CLIN 1001 Task 7	CPAF	
CLIN 1001 Task 8	CPAF	
CLIN 1001 Total	CPAF	
Option Period One Total Hours		
Option Period Two		
CLIN 2001 Task 1	CPAF	
CLIN 2001 Task 2	CPAF	
CLIN 2001 Task 3	CPAF	
CLIN 2001 Task 4	CPAF	
CLIN 2001 Task 5	CPAF	
CLIN 2001 Task 6	CPAF	
CLIN 2001 Task 7	CPAF	
CLIN 2001 Task 8	CPAF	
CLIN 2001 Total	CPAF	
Option Period Two Total Hours		
Option Period Three		
CLIN 3001 Task 1	CPAF	
CLIN 3001 Task 2	CPAF	
CLIN 3001 Task 3	CPAF	

CLIN 3001 Task 4	CPAF	
CLIN 3001 Task 5	CPAF	
CLIN 3001 Task 6	CPAF	
CLIN 3001 Task 7	CPAF	
CLIN 3001 Task 8	CPAF	
CLIN 3001 Total	CPAF	
Option Period Three Total Hours		
Option Period Four		
CLIN 4001 Task 1	CPAF	
CLIN 4001 Task 2	CPAF	
CLIN 4001 Task 3	CPAF	
CLIN 4001 Task 4	CPAF	
CLIN 4001 Task 5	CPAF	
CLIN 4001 Task 6	CPAF	
CLIN 4001 Task 7	CPAF	
CLIN 4001 Task 8	CPAF	
CLIN 4001 Total	CPAF	
Option Period Four Total Hours		
Option Period Five		
CLIN 5001 Task 1	CPAF	
CLIN 5001 Task 2	CPAF	
CLIN 5001 Task 3	CPAF	
CLIN 5001 Task 4	CPAF	
CLIN 5001 Task 5	CPAF	
CLIN 5001 Task 6	CPAF	
CLIN 5001 Task 7	CPAF	
CLIN 5001 Task 8	CPAF	
CLIN 5001 Total	CPAF	
Option Period Five Total Hours		
Option Period Six		
CLIN 6001 Task 1	CPAF	
CLIN 6001 Task 2	CPAF	
CLIN 6001 Task 3	CPAF	
CLIN 6001 Task 4	CPAF	
CLIN 6001 Task 5	CPAF	
CLIN 6001 Task 6	CPAF	
CLIN 6001 Task 7	CPAF	
CLIN 6001 Task 8	CPAF	
CLIN 6001 Total	CPAF	
Option Period Six Total Hours		

Option Period Seven		
CLIN 7001 Task 1	CPAF	
CLIN 7001 Task 2	CPAF	
CLIN 7001 Task 3	CPAF	
CLIN 7001 Task 4	CPAF	
CLIN 7001 Task 5	CPAF	
CLIN 7001 Task 6	CPAF	
CLIN 7001 Task 7	CPAF	
CLIN 7001 Task 8	CPAF	
CLIN 7001 Total	CPAF	
Option Period Seven Total Hours		
Optional CLIN (Transition Out)		
CLIN 0007 Task 2	CPAF	
Total CLIN X001	CPAF	
Total CLIN 0007	CPAF	
Total Hours	N/A	

Subcontracts Summary

Company Name:

Subcontractor	Small Business (SB) Concern Category if SB (i.e SB, WOSB etc.)	Subcontract Type (e.g. T&M, CPFF etc..)	Estimated Value (\$)	Estimated Value (%) (of Total Labor Costs)
TOTAL			\$ -	0%

Labor CLIN 0001 Summary				
Base Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				
7				
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 0001 - Direct Labor (Task 1)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 2)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 3)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 4)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 5)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 6)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 7)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 0001 - Direct Labor (Task 8)													
Base Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 Labor Summary				
First Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated CPAF
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				\$ -
7				
8				
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 1001 - Direct Labor (Task 1)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 2)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 3)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 4)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 5)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 6)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 7)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 1001 - Direct Labor (Task 8)													
First Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 Labor Summary				
Second Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated CPAF
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				
6				
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 2001 - Direct Labor (Task 1)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 2)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 3)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 4)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 5)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 6)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 7)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 2001 - Direct Labor (Task 8)													
Second Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 Labor Summary				
Third Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated CPAF
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				
6				
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 3001 - Direct Labor (Task 1)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 2)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 3)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 4)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 5)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 6)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 7)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 3001 - Direct Labor (Task 8)													
Third Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

Labor CLIN 4001 Summary				
Fourth Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				
6				
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 4001 - Direct Labor (Task 1)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 2)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 3)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 4)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 5)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 6)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 7)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 4001 - Direct Labor (Task 8)													
Fourth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

Labor CLIN 5001 Summary				
Fifth Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				\$ -
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
---------------------------------------	--

CLIN 5001 - Direct Labor (Task 1)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 2)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 3)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 4)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 5)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 6)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 7)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 5001 - Direct Labor (Task 8)													
Fifth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

Labor CLIN 6001 Summary				
Sixth Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				\$ -
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 6001 - Direct Labor (Task 1)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 2)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 3)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 4)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 5)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 6)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 7)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 6001 - Direct Labor (Task 8)													
Sixth Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

Labor CLIN 7001 Summary				
Seventh Option Period				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
1	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
2				\$ -
3				\$ -
4				\$ -
5				\$ -
6				\$ -
7				\$ -
8				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 7001 - Direct Labor (Task 1)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 2)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 3)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 4)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 5)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 6)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 7)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

CLIN 7001 - Direct Labor (Task 8)													
Seventh Option Period													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	

Labor CLIN 0007 Summary				
Transiton Out				
A	B	C	D	E
Task Area	Total hours	Total Estimated Cost	Award Fee Amount	Total Estimated Cost-Plus-Award-Fee (CPAF)
2	Insert total hours per task area for labor.	Insert proposed total estimated cost per task area for labor.	Insert proposed total Award Fee Amount.	Insert proposed total estimated CPAF for labor. (Sum of Columns C and D)
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Labor Total:	0	\$ -	\$ -	\$ -

Number of hours in a Man-Year:	
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CLIN 0007 - Direct Labor (Task 2)													
Transition Out													
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Task/ Subtask	Labor Category Description	Key Personnel	Prime Contractor or Subcontractor?	Applicable Indirect Rate Cost Center	Proposed Direct Labor Rate	Rate Buildup (Direct Labor plus all applicable loads)	Proposed Fully Burdened Labor Rate	Total hours for Task X	Extended Value	Award Fee Percentage (%)	Award Fee Amount (\$)	Total Estimated Cost	Notes
Insert the Task/ Subtask	Insert applicable Alliant 2 labor categories below.	Indicate whether this is a Key Personnel. (Yes/No)	Insert the name of the company this individual works for.	Insert the applicable indirect rate cost center.	Insert the proposed direct labor rate.	The offeror shall insert new columns as appropriate to completely show all applicable loads and the cost buildup. The offeror shall ensure all loads are clearly labeled. It shall be clear how the offeror progressed from the Proposed Direct Labor Rate to the Proposed Fully Burdened Rate.	Insert the proposed fully burdened labor rate.	Insert total hours.	#VALUE!		#VALUE!	#VALUE!	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
									\$ -		\$ -	\$ -	
Insert additional rows as necessary							Total hours for Task X, Total Extended Value for Task X, Award Fee, and Total Estimated Cost:	Insert Total Hours	Insert Total Extended Value	Insert Award Fee Percentage	Insert Award Fee Amount for this Task Area	Insert Total Extended Value plus Award Fee Amount for this Task Area	



INSTRUCTIONS -- Fill in only the columns/colors per instructions below. DO NOT delete or sort any rows in this spreadsheet.	
1. Each tab (for each period) must list all proposed staff, whether they are used in a particular performance period or not. If proposing staff in one or more, but not all periods (e.g., only for surge periods), zero out the hours for staff during the performance period in which staff is not proposed to work. DO NOT delete or sort any rows in this spreadsheet.	
2. In the functional roles column, include not only the Functional Role title, but also a description of the duties and/or tasks performed by the individual in that role. This is regardless of whether there is a named individual proposed for the Functional Role or if it is To Be Determined (TBD).	
3. In the qualifications column, include the qualifications, expertise and certification(s) of the proposed individual, or, if an individual has not yet been identified, include the qualifications, expertise, and certifications to fill the requirements of the position.	
4. Each row should represent one proposed personnel regardless of whether a name is provided or TBD. For example, for ten TBD Data Analysts, use ten rows; specify in each row the hours, functional role description, clearance level at time of proposal submission, qualifications, expertise, certifications, etc. of the proposed individual/position. DO NOT combine the hours for ten TBD Data Analysts into one row.	
5. Do not add hours for Task 9 as it will be calculated as a percentage of the dollar value of Tasks 1 through 8.	

ATTACHMENT S

KEY PERSONNEL QUALIFICATION MATRIX

The following is an example of how the Key Personnel Qualification Matrix shall map to Section H.1 of the Task Order Request (TOR). The example describes the required and desired qualifications for a Security Manager designated as “Key,” and shows how the Key Personnel Qualification Matrix shall be formatted.

H.1.3 SECURITY MANAGER

It is required that the Security Manager has the following qualifications:

- a. Recognized IT security certification, such as a Certified Information Systems Security Manager (CISSM) or Certified Information Systems Security Professional (CISSP).
- b. Demonstrated experience defining strategic governance for security management, defining quality metrics, and implementing repeatable processes for a portfolio of applications

It is desired that the Senior Network Engineer has the following qualifications:

- a. At least five years of experience managing IT security teams in a Government environment.
- b. A Bachelor’s degree in IT, Computer Science, Information Systems, or a related field.

Note: Multiple pages for each Key Personnel Qualification Matrix are acceptable. See page limitations in TOR Section L.6, Key Personnel Qualification Matrix.

KEY PERSONNEL QUALIFICATION MATRIX

Proposed Key Personnel Name:	
Proposed Key Personnel Position: Security Manager	
Proposed Alliant 2 Labor Category:	
Proposed Key Personnel meets the requirements of the proposed Alliant 2 Labor Category (Yes /No):	
Proposed Key Personnel meets the Security Requirements in TOR Section H.4.3 (Yes/No):	
Proposed Key Personnel is available to begin work on the Start Date designated in TOR Section L.3 (Yes/No):	
Rationale for the proposed Alliant 2 Labor Category:	
Rationale for/value of the proposed additional Key Personnel position (as applicable): N/A	
REQUIRED QUALIFICATIONS	
Description of Qualifications and Experience (e.g., Place of Work, Official Title for Each Position Held, etc.)	
Years of Experience (month/year)	H.1.3.a Recognized IT security certification, such as a Certified Information Systems Security Manager (CISSM) or Certified Information Systems Security Professional (CISSP).
Years of Experience (month/year)	H.1.3.b Demonstrated experience defining strategic governance for security management, defining quality metrics, and implementing repeatable processes for a portfolio of applications
DESIRED QUALIFICATIONS	
Description of Qualifications and Experience (e.g., Place of Work, Official Title for Each Position Held, etc.)	
Years of Experience (month/year)	H.1.3.a At least five years of experience managing IT security teams in a Government environment.

KEY PERSONNEL QUALIFICATION MATRIX

Years of Experience (month/year)	H.1.3.b A Bachelor's degree in IT, Computer Science, Information Systems, or a related field.



ATTACHMENT T
CORPORATE EXPERIENCE TEMPLATE

Corporate Experience Example (insert #)	
Awarding Agency:	
Program/Project Title:	
TO/Contract number:	
Contract vehicle (e.g., IDIQ, GSA Schedule, GWAC): and name:	
Contract ceiling per year and in total:	
Total amount of funding applied per year and in total:	
Number of contractor personnel supporting the effort:	
List of labor categories:	
Contractor's role – prime or subcontractor and percentage and type of work performed:	
Period of performance (month/year for beginning and end) all years:	
Contract type (FFP, T&M, CPFF, etc.):	
Security level of work:	
Organization supported:	
POC #1 to contact – Government COR (name, current telephone number, and email address):	
POC #2 to contact – Alternate POC (name, current telephone number, and email address):	
Project Overview	
Description of the work performed including the services provided, how it relates to the TOR (Tasks and Subtasks of Section C), and relevance in terms of size, scope, and/or complexity.	
Roles and Responsibilities	
Description of the offeror's roles and responsibilities and how it relates to the TOR requirements.	

ATTACHMENT U - ACQUISITION RISK QUESTIONNAIRE

General Information

Company Name: [Click here to enter text.](#)

Corporation Type (check one): ☐ Public ☐ Private ☐ Other ☐ Unknown

Major Product: [Click here to enter text.](#)

DUNS Number: [Click here to enter text.](#) Stock Exchange: [Click here to enter text.](#)

Stock Symbol: [Click here to enter text.](#) Established Date: [Click here to enter text.](#)

Incorporated Date: [Click here to enter text.](#) Web Address: [Click here to enter text.](#)

Central Contractor Registration (check one): ☐ Active ☐ Inactive ☐ None

Central Contractor Registration Date: [Click here to enter text.](#)

Is Foreign? ☐ yes ☐ no Has National Security Agreement? ☐ yes ☐ no

Products and Services:

SIC: [Click here to enter text.](#)

PSC: [Click here to enter text.](#)

Cage/NCage Code: [Click here to enter text.](#) NAICS: [Click here to enter text.](#)

Contract Information:

Company Phone: [Click here to enter text.](#)

Company Point of Contact (POC): [Click here to enter text.](#)

Company POC Phone: [Click here to enter text.](#)

Street Address Type (check one): ☐ Headquarters ☐ Satellite Location

☐ Sales Office ☐ Manufacturing Plant ☐ Distribution ☐ Other

Address: [Click here to enter text.](#)

City: [Click here to enter text.](#)

State: [Click here to enter text.](#)

Zip/Postal: [Click here to enter text.](#)

Country: [Click here to enter text.](#)

Foreign Ownership, Control or Influence

1a. (For entities which issue stock): Do any foreign person(s), directly or indirectly, own or have beneficial ownership of 5% or more of the outstanding shares of any class of your organization's equity securities? ☐ **yes** ☐ **no** If yes, please list all parents, both foreign and domestic, by name and address, through to the ultimate parent, to include percentage of ownership. This should include any and all foreign investments in the entity. Include country of origin. Include any special rights or privileges involved in the ownership. Foreign person is defined as any foreign interest and any U.S. person effectively owned or controlled by a foreign interest. Foreign interest is defined as any foreign government, to include any agency or representatives of that government; or any form of business or legally organized entity chartered or incorporated under the laws of any country other than the U.S. or its possessions; and any person who is not a citizen of the U.S.. [Click here to enter text.](#)

1b. (For entities which do not issue stock): Has any foreign person directly or indirectly subscribed 5% or more of your organization's total capital commitment? ☐ **yes** ☐ **no** If yes, please list all parents, both foreign and domestic, by name and address, through to the ultimate parent, to include percentage of ownership. This should include any and all foreign investments in the entity. Include country of origin. Include any special right or privileges involved in the ownership. Foreign person is defined as any foreign interest and any U.S. person effectively owned or controlled by a foreign interest. Foreign interest is defined as any foreign government, to include any agency or representatives of that government; or any form of business or legally organized entity chartered or incorporated under the laws of any country other than the U.S. or its possessions; and any person who is not a citizen of the U.S.. [Click here to enter text.](#)

2. Does your organization directly, or indirectly through your subsidiaries and/or affiliates, own 10% or more of a foreign interest? ☐ **yes** ☐ **no** If yes, please list all involved by name, address, and country, with percentages of ownership. Include the names of the personnel running the facilities. [Click here to enter text.](#)

3. Do any non-U.S. citizens serve as members of your organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management officials? ☐ **yes** ☐ **no** If yes, please list ALL corporate officers (Chairman of the Board, President, Chief Executive Officer, Vice-Presidents, Secretary, Treasurer, Chief Information Officer, Chief Financial Officer, and General Counsel), executive personnel (Facility Security Officer) and all other Board of Director members by full legal name, title, date and place of birth, social security number (SSN), and citizenship. [Click here to enter text.](#)

4. Does any foreign person(s) have power, direct or indirect, to control the election, appointment, or tenure of members of your organization's board of directors (or similar governing body) or other management positions of your organization, or have the power to control or cause the direction of other decisions activities of your organization? ☐ **yes**

☐ **no** If yes, identify the individuals by full legal name, title, and citizenship. Provide a full explanation of the individual's control or influence. [Click here to enter text.](#)

ATTACHMENT U - ACQUISITION RISK QUESTIONNAIRE

5. Does the organization have any contracts, agreements, understandings, or arrangements with a foreign person(s)? ☐ yes ☐ no If yes, this would include licenses, distributorships, contracts, purchase orders, sales agreements, etc. For each instance, provide the name of the foreign entity, its country, the percentage of gross income derived, and the nature of the involvement including what type of technology or product is involved, whether the product or service is either defense or nuclear related, whether classified or export controlled information is involved, and whether there is compliance with all U.S. export laws. If not defense or nuclear related, the listing of contracts can be done by listing similar equipment by country and percentage. [Click here to enter text.](#)

6. Does the organization, whether as borrower, surety, guarantor or otherwise have any indebtedness, liabilities, obligations, or obligations to a foreign person(s)? ☐ yes ☐ no If yes, give details concerning with whom the debt or guarantee is, where they are located, the conditions or covenants regarding the debt, and what collateral, if any, was pledged. If stock or assets are pledged, provide copies of the pertinent documents. Provide details on procedures for default of the loans. This answer must be answered affirmatively even if the entity holding the loan is a U.S. entity of a foreign institution. [Click here to enter text.](#)

7a. During your last fiscal year, did your organization derive 5% or more of its total revenues or net income from any single foreign person? ☐ yes ☐ no If yes, please identify the sources from which the income is derived, to include name of entity, country, and percentage. Identify, whether classified or export controlled information or technology is involved. If so, attach copies of licenses. [Click here to enter text.](#)

7b. During your last fiscal year, did your organization derive in the aggregate 30% or more of its revenues or net income from foreign persons? ☐ yes ☐ no If yes, please identify the sources from which the income is derived, to include name of entity, country, and percentage. Identify, whether classified or export controlled information or technology is involved. If so, attach copies of licenses. [Click here to enter text.](#)

8. Is 10% or more of any class of your organization's voting securities held in "nominee" share, in "street names" or in some other method which does not identify the beneficial owner? ☐ yes ☐ no If yes, identify the foreign institutional investors by name, address, and percentage of securities owned. Indicate whether there have been any attempts to exert control or influence over management or policies of the organization. If available, include SEC Schedules 13D or 13H. [Click here to enter text.](#)

9. Do any members of your organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management official hold any positions with, or serve as consultants for any foreign person(s)? ☐ yes ☐ no If yes, identify by name, title, citizenship or immigration status, whether the individual holds a personnel security clearance or is excluded from access, each individual meeting this criteria. Also, identify the name and address of each organization with which the individual holds a position, and in what capacity. [Click here to enter text.](#)

10. Are there any other factor(s) that indicate or demonstrates a capability on the part of foreign person(s) to control or influence the operations or management of your organization? ☐ yes ☐ no If yes, please describe in detail the involvement of the foreign

ATTACHMENT U - ACQUISITION RISK QUESTIONNAIRE

entity, as well as why it is not reportable in accordance with the previous questions. [Click here to enter text.](#)

ATTACHMENT U - ACQUISITION RISK QUESTIONNAIRE

Key Management and Personnel List (KMPL)

*Only required if the procurement is classified and requires a security clearance.

Name: [Click here to enter text.](#)

Position Title: [Click here to enter text.](#)

SSN: [Click here to enter text.](#)

Citizenship: [Click here to enter text.](#)

Born: [Click here to enter text.](#)

Clearance: [Click here to enter text.](#)

Submitted: [Click here to enter text.](#)

Comments: [Click here to enter text.](#)

Company Relationships

Company: [Click here to enter text.](#)

Relationship Type (check one): ☐ Former Name ☐ DBA ☐ Nickname
☐ Other (i.e., partnership, parent, subsidiaries, suppliers, etc.)

Related To: [Click here to enter text.](#)

Action: [Click here to enter text.](#)

Attachment V – Performance Requirements Summary and SLA Template

Instructions: The draft Award Fee Determination Plan (AFDP) – Attachment D – outlines subjective award fee criteria across four different areas. Service Level Agreements (SLAs) will be grouped into two pools – Pool 1 and Pool 2 – with Pool 1 having fewer SLAs and, therefore, a greater weighting on each SLA within the pool than those in Pool 2.

Using the tables below, the offeror shall propose at least eight SLAs, but no more than 12 SLAs, that meaningfully measure effective and efficient performance on the Task Order (TO). The offeror shall propose six of the SLAs within the required tasks and performance measures indicated as “required” in the tables below. The remaining SLAs (at least two additional to meet the minimum of eight, but no more than six additional to reach the maximum of 12) may be proposed in any of the task areas within the TO.

For each proposed SLA, the offeror shall complete the charts below with the following information:

- a. A title in the “Performance Measures” column.
- b. A brief summary of the proposed method to monitor performance of that SLA.
- c. A brief summary of why that SLA was chosen and how high performance on that SLA will benefit the Government under this TO.
- d. A recommendation of whether the SLA should be in Pool 1 or Pool 2.

Additionally, the offeror shall complete a copy of Appendix V.1 (BEAGLE SLA Template) for each proposed SLA. This document provides detailed information on how the SLA is measured (including the specific calculation methodology), metrics necessary to achieve each level of performance, what conditions/exceptions may exist, and related details. Instructions on how to complete the template can be found on Appendix V.1 in blue text.

Task 1: Provide TO Management

Desired Outcomes: The contractor shall provide effective delivery of the required support services and deliverables and shall ensure that contractor performance is within Performance Requirements Specifications (PRS) targets specific to quality, cost, and schedule objectives. The contractor shall provide all necessary program, project, financial, contractor, and subcontractor management as well as functional and technical personnel resources necessary to support this TO. The contractor shall institute and maintain the highest level of management and quality processes and methodologies that ensure quality performance is obtained within cost and schedule constraints of this TO. The contractor shall regularly report technical, financial, personnel, risks, and general managerial problems to the Federal Systems Integration and Management Center (FEDSIM) Contracting Officer’s Representative (COR) and Border Enforcement Applications for Government Leading-Edge Information Technology (IT) (BEAGLE) Technical Point of Contact (TPOC) throughout the TO period of performance and elevate the immediacy of the reporting based on the significance of the problem.

Attachment V – Performance Requirements Summary and SLA Template

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
Cost Performance Indicator *required; offeror shall propose an SLA within this category	Offeror propose for Government Approval	Offeror propose for Government Approval	
BI Quality and Timeliness *required; offeror shall propose an SLA within this category <i>Note: This SLA will be used as a part of the Period 1 AFDP for transition-in.</i>	Offeror propose for Government Approval	Offeror propose for Government Approval	
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Task 3: Provide Portfolio Management

Desired Outcomes: Effective and efficient program and project governance, portfolio prioritization, planning, and budgeting functions including the development of application business cases, burn reports, administrative assistance, asset inventory, and ad-hoc reports within the Border Enforcement Management Systems Directorate (BEMSD) portfolio.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
Efficiency Savings *required; offeror shall propose an SLA within this category	Offeror propose for Government Approval	Offeror propose for Government Approval	
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Attachment V – Performance Requirements Summary and SLA Template

Task 4: Provide Technology Management

Desired Outcomes: Ability to effectively provide engineering and architecture support activities, technology stack, and Agile standardization utilizing SecDevOps methodology and Agile coaching for applications within the BEMSD portfolio of applications. Task 4 desired outcomes include the ability to proactively plan and control migrations to support future state operations, environments, and technology platforms.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Task 5: Provide Application Development and IT Security

Desired Outcomes: Capabilities shall be delivered in standardized, efficient, Agile-based methods. Capabilities shall be compliant with National Institute of Standards and Technology (NIST)/Department of Homeland Security (DHS)/Bureau of Customs and Border Protection (CBP) cybersecurity and system security implementation guides, frameworks, directives, and standards for applications.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
Application Development Capabilities *required; offeror shall propose an SLA within this category	Offeror propose for Government Approval	Offeror propose for Government Approval	
Cybersecurity and system security compliance and risk management *required; offeror shall propose an SLA within this category	Offeror propose for Government Approval	Offeror propose for Government Approval	
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Attachment V – Performance Requirements Summary and SLA Template

Task 6: Provide Production O&M

Desired Outcomes: Effectively support the configuration of Commercial Off-the-Shelf (COTS) software and, if needed, the customization and/or coding and testing of custom software to correct, update, performance-tune, and/or make minor modifications to existing systems in support of the original or emerging functional requirements. Provide support of a Government lab, including technology testing, development, and O&M. Provide effective Disaster Recover (DR)/Continuity of Operations (COOP) planning and management support.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Task 7: Provide Customer Services

Desired Outcomes: Effective support to end users of the Information Technology (IT) applications within the BEAGLE portfolio. Ability to operate a customer support structure to address trouble calls, resolve incident issues, and provide appropriate reporting.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
Help Desk Ticket Resolution *required; offeror shall propose an SLA within this category	Offeror propose for Government Approval	Offeror propose for Government Approval	
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Task 8: Provide Data Analysis, Rationalization, and Analytics

Desired Outcomes: Execute a variety of analytics methods to gather, conceptualize, and prioritize the needs of its customers in a form that is most meaningful to standardize, consolidate, and/or begin successful architecture. Effectively utilize Business Intelligence

Attachment V – Performance Requirements Summary and SLA Template

tools, methodology, and expertise that assists in detecting trends, patterns, and non-obvious relationships in data contained in a multitude of systems and an enterprise data warehouse.

Performance Measures	Monitoring Method	Description of why SLA was selected and benefits to the Government	Pool 1 or 2?
<i>Offeror <u>may</u> choose to propose additional SLAs within this task area.</i>			

Appendix V.1: BEAGLE SLA Template

APPENDIX V.1: BEAGLE SLA Template

Instructions: The contractor shall use the format below to describe the SLA and document the conditions, exceptions, performance level metrics, method(s) for measuring the SLA, the period of measurement, and method of reporting the measurement.

SLA (# here): SLA TITLE			
DESCRIPTION: <i>Succinctly summarize the objective of the SLA and its benefit to the Government (2-3 sentences maximum).</i>			
CONDITIONS: 1. List conditions for the SLA measurement (ex. requires X number of reportable events per period to be measured; assumptions outside of the contractor's control).			
EXCEPTIONS: 1. List exceptions that would cause the SLA to become non-reportable.			
Metric Achievement Ranges		Unit:	Ex. percentage, # of incidents, etc.
Excellent	Insert ranges for each level, ensuring that ranges do not overlap.	How Measured:	List the specific tool(s) or method(s) used to track the data associated with this SLA.
Very Good		Period:	6-month award fee period (if other, list)
Good		Metric:	In a <u>detailed</u> manner, describe how the SLA metric is calculated.
Satisfactory		Reported:	Describe what report(s) or tool(s) will be used to report the SLA metrics.
Unsatisfactory			

Attachment W
Questions and Answers Template

Company Name:
Solicitation Number: **47QFCA19R0029**

Note to offerors: Please provide the specific paragraph reference using the Section/sub-Section numbers in the solicitation.

PART #	PARAGRAPH #	PARAGRAPH TITLE	QUESTION	GOVERNMENT RESPONSE

[Enter date]

[Enter FEDSIM Contracting Officer or Contract Specialist Name]

GSA FAS AAS FEDSIM
1800 F Street, NW
Washington, DC 20405

Subject: Task Order Request (TOR **47QFCA19R0029**) Key Personnel Letter of
Commitment

Dear *[Mr. or Ms.] [Enter FEDSIM Contracting Officer or Contract Specialist Name]*:

I, *[enter proposed Key Personnel's first and last name]*, hereby commit to serve as the *[enter proposed Key Personnel's position title]* in response to TOR 47QFCA19R0029 upon award of the resultant Task Order. I certify that the information submitted in the Key Personnel Qualification Matrix is accurate. Furthermore, I certify that I am currently an employee of *[enter offeror name]*. I am committed and available to begin work on the Project Start date indicated in TOR Section L.3.

I have read and personally signed this Letter of Commitment.

Printed Name

Signature

Date